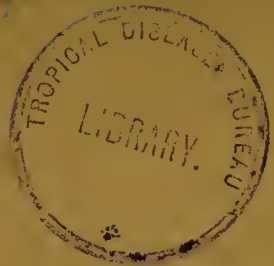
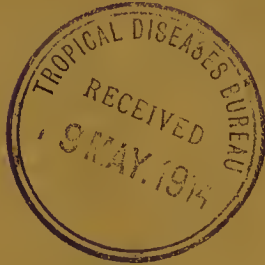


Duplicate



J A M A I C A.

A N N U A L R E P O R T



OF THE

SUPERINTENDING MEDICAL OFFICER,

Together with the Reports on the following Departments of the Medical Service of the Island, viz. :

THE PUBLIC HOSPITAL
THE LYING-IN HOSPITAL

THE LUNATIC ASYLUM
THE LEPERS' HOME

FOR

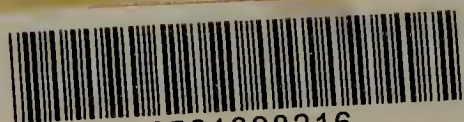
THE YEAR ENDED 31ST MARCH, 1911.

Ordered by His Excellency the Governor to be Printed.



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ISLAND MEDICAL DEPARTMENT.

Report for the year ended 31st March, 1911.

Island Medical Office, Kingston, 3rd July, 1911.

SIR,

I have the honour in compliance with your Circular No. 4,751, dated 13.6.11, which calls for the Annual Report on June 30th. to submit the accompanying Returns and Reports for the information of His Excellency the Governor embracing the period from April 1st, 1910, to March 31st, 1911. The following Officers of the Department were on leave of absence during the year:—

Dr. J. E. Ker from 16.6.10 to 17.10.10.

Dr. G. H. K. Ross, Snr. Res. Med. Officer, Public Hospital, Kingston from 5.5.10 to 4.11.10.

Dr. H. George from 14.6.10 to 13.12.10. Dr. R. Turton from 11.8.10 to 16.10.10.

Dr. H. G. Johnston from 1.12.10 to 12.1.11. Dr. H. Joslen from 25.8.10 to 14.10.10.

Dr. V. Ff. Mullen from 26.6.10 to 25.12.10.

DISTRICT MEDICAL SERVICE.

Dr. A. E. Myers, Supernumerary Medical Officer was appointed D. M. O., Falmouth on the resignation of Dr. F. deL. Myers and assumed duty on 11th November, 1910.

Dr. R. G. Sherlock was appointed Supernumerary Medical Officer from 1.4.10.

Dr. C. S. Gideon was appointed acting Supernumerary Medical Officer on 17th August, 1910, and was confirmed in the appointment on 5.4.11.

Dr. M. T. Cassidy was appointed Supernumerary Medical Officer and to act from 14.12.10 as D. M. O., Crofts Hill District in Clarendon, a District provisionally formed by the Government, pending the approval by the Legislative Council of its permanent establishment as from 1.4.11. The Legislative Council approved of the permanent establishment of the District.

Dr. C. E. Sharp was appointed D. M. O. of the Hagley Gap District of St. Thomas, on the transfer of Dr. H. G. Johnston to the Adelphi District to fill the vacancy created by the death of Dr. I. Costa. Dr. Sharp assumed duty on the 19th November, 1910.

A medical practitioner residing in Hope Bay in the Buff Bay District has been appointed temporarily at a salary of £50 per annum to give medical Assistance in that District and to perform vaccinations and Post Mortem Examinations only when the D.M.O. is not available for the performance of those services.

This appointment has been temporarily extended for another period.

Return of the expenditure of the Island Medical Department for the year ended 31.3.11.

	Personal emoluments.			Other charges.			Gross expenditure.			Amount of Dues collected.			Actual expen- diture after deducting amount passed to credit of Hospital.			Amounts of grants estimated.		
Head Office ..	2,349	3	6	5,483	9	9	7,832	13	3	1,351	12	2	6,481	1	1	6,313	8	10
District Medical Officers and Supernumerary Officers ..	6,227	6	0	..	..	..	6,227	6	0	..	..	..	6,227	6	0	6,450	0	0
Public General Hospitals—																		
Morant Bay ..	173	10	0	288	14	4	462	4	4	8	11	10	453	12	6	461	2	0
Hordey ..	192	4	0	270	0	1	462	4	1	7	12	4	454	11	9	441	12	0
Port Antonio ..	373	15	7	1,743	14	1	2,117	9	8	41	11	4	2,075	18	4	2,263	4	0
Buff Bay ..	189	0	2	385	18	6	574	18	8	11	0	5	563	18	3	585	12	0
Annotto Bay ..	371	17	0	1,712	10	3	2,084	7	3	19	13	2	2,064	14	1	2,634	8	0
Port Maria ..	253	14	6	891	3	1	1,144	17	7	14	2	9	1,130	14	10	1,332	16	0
St. Ann's Bay ..	170	9	0	234	6	1	404	15	1	2	10	4	402	4	9	437	8	0
Cave Valley ..	53	8	0	91	2	1	144	10	1	2	4	8	142	5	5	171	0	0
Falmouth ..	194	0	0	200	8	9	394	8	9	7	12	6	386	16	3	377	4	0
Montego Bay ..	179	1	0	296	17	4	475	18	4	20	3	2	455	15	2	444	16	0
Lucea ..	189	3	4	217	7	1	406	10	5	9	3	7	397	6	10	450	7	0
Sav.-la-mar ..	254	4	11	941	15	0	1,195	19	11	28	14	0	1,167	5	11	1,345	16	0
Black River ..	169	4	6	239	18	2	409	2	8	18	12	11	390	9	9	427	0	0
Mandeville ..	190	4	0	414	15	2	604	19	2	2	12	10	602	6	4	563	12	0
Chapelton ..	231	3	7	420	6	9	651	10	4	6	2	4	645	8	0	654	8	0
Crofts Hill ..	..	..	..	2	16	0	2	16	0	..	..	..	2	16	0	29	16	0
Lionel Town ..	249	2	11	774	14	4	1,023	17	3	8	7	6	1,015	9	9	1,424	0	0
Spanish Town ..	315	17	0	760	15	6	1,076	12	6	51	17	2	1,024	15	4	998	12	0
Linstead ..	127	7	9	189	9	2	316	16	11	4	12	8	312	4	3	376	4	0
Yaws Fees ..	1,265	2	11	..	..	..	1,265	2	11	..	..	..	1,265	2	11	800	0	0
Venereal Disease	48	7	0	..	..	..	48	7	0	..	..	..	48	7	0	150	0	0
Drugs and Poi- sons Law ..	16	19	6	..	..	..	16	19	6	..	..	..	16	19	6	15	0	0
Medical Atten- dance on Im- migrants ..	637	16	10	..	..	..	637	16	10	..	..	..	637	16	10	550	0	0
Public Hospital	3,823	1	10	5,193	13	0	9,016	14	10	337	9	11	8,679	4	11	9,214	16	2
Lunatic Asylum	6,395	9	6	12,736	6	1	19,131	15	7	17,263	3	6½	1,868	12	0½	17,955	10	7
Lepers' Home ..	957	1	5	1,425	1	6	2,382	2	11	..	..	..	2,382	2	11	2,448	8	0
Victoria Jubilee Lying-in-Hos- pital ..	535	15	0	764	8	0	1,300	3	0	321	1	9	779	1	3	1,324	7	0
Vaccination Fees	1,499	2	7	..	..	..	1,499	2	7	..	..	..	1,499	2	7	1,910	0	0
Medical Officer, General Peni- tentiary ..	250	0	0	..	..	..	250	0	0	..	..	..	250	0	0	250	0	0
Health Officer, Port Royal ..	450	0	0	..	..	..	450	0	0	..	..	..	450	0	0	450	0	0
Quarantine ..	160	16	5	407	8	11	568	5	4	..	..	..	568	5	4	969	12	0
Central Board of Health ..	..	..	..	14	11	1	14	11	1	..	..	..	14	11	1	25	0	0
Medical Council	19	19	0	..	..	..	19	19	0	..	..	..	19	19	0	20	0	0
Investigation in- to Vomiting Sickness ..	218	13	7	..	..	..	218	13	7	..	..	..	218	13	7	..	..	..
Total ..	28,732	2	4	36,101	10	1	64,833	12	5	19,538	9	4½	45,294	19	6½	64,264	19	7

Value of Drugs, etc., issued to the various Institutions, etc., during the financial year 1910-1911 from the Island Medical Store.

	£	s.	d.
Value of drugs and sundries issued to Public Hospital, Leper's Home and Medical Districts	1,772	7	10
" Stimulants issued to Public Hospital Leper's Home	44	5	0
" Drugs, etc., issued to Kingston Public Hospital	762	17	7
" Drugs, etc., issued to Jubilee Hospital	53	11	9
" Stimulants issued to Jubilee Hospital	1	1	0
" Drugs and sundries issued to Lunatic Asylum	266	16	8
" Stimulants issued to Lunatic Asylum	15	10	5
" Drugs and sundries issued to Prisons and Reformatories	143	0	8
" Stimulants issued to Prisons and Reformatories	3	17	3
" Drugs issued to Government Laboratory	2	4	3
" Drugs, etc., issued to Quarantine Station and visiting Officers	2	8	1
" Drugs, etc., issued to Hope Government Farm	10	4	9
" Drugs, etc., issued to Schools' Department	8	7	5
" Drugs, etc., issued to Parochial Boards	387	8	6
" Drugs and sundries issued to Constabulary Department	33	17	8
" Quinine in packets supplied to Post Offices, etc.	143	8	1
" Drugs and sundries sold	18	4	8
" Lymph supplied	255	7	0
" Quinine issued to Malaria Commission	125	2	7
" Quinine issued to estates	133	0	0
" Drugs, etc., issued to Immigration Department	1	14	9
" Drugs, etc., issued to Audit Department	0	4	4
Total	£4,185	0	3

QUARANTINE.

Dr. Donovan's Report.

During the past year six persons were landed from two ships at the Quarantine Station. The admissions were : Second class, adults 2. Third class, adults 2, children 2, total 4.

During the year the following places remained under proclamation : all ports in the Republic of Brazil for Small-pox and Yellow Fever ; all ports of Venezuela for Plague and Mozaltan in Mexico.

On 28.2.11 the proclamation declaring to be infected the ports on the Atlantic coast of Costa Rica and Panama between and inclusive of the Points Caetta and Rincon was withdrawn by the Governor in Privy Council.

The Proclamation against Trinidad for Plague was withdrawn on 18.10.10. but sporadic cases of the disease occurred since then necessitating quarantine restrictions.

The amount of Quarantine maintenance fees received during the same period was £25 7s. 7d

Twenty-three Meetings have been held by the Quarantine Board during the year under review.

New Works and repairs done at the station during 1910-1911.

Ground floor of new 3rd class building was cemented and enclosed with fixed jalousies and fitted with the necessary doors and windows of glass, forming a fairly comfortable and well ventilated and lighted apartment capable of accomodating some thirty cots, a very desirable accession to the 3rd class accommodation.

The small rectangular tank, adjoining this building has been raised two feet higher, which will enable it to hold 2,500 gallons more water, or in all 7,500 gallons.

The 2nd and 3rd class Lavatories have been re-shingled.

A large press has been constructed in the linen room, as well as shelves for the better convenience and protection of the clothes.

Annual repairs—Painting and lime washing 2nd and 3rd class buildings, lavatories, latrines, kitchen store, Superintendent's quarters, disinfecting building, painting crane of wharf, flag staff, telephone posts, tanks lime washed, replanked, and new wooden rails (pitch pine used instead of iron ones and piles tarred).

The eaves gutters of all the buildings were repaired and fixed up ; all the concrete surface drains about the buildings were repaired, as well as the lightning conductors (three), the valve of the large tank, in January 1911 owing to defective valve, and general repairs to all buildings.

All the bush in the compound around the Institution to the boundaries was cut down and burnt, the ground borders were cut down and as many of the small trees and shrubs were uprooted as was feasible.

The grounds are at present thoroughly clean of bush, etc., and there is a very marked decrease in the mosquito line.

(Signed) J. F. DONOVAN, M.D.,
Health Officer.

The Quarantine Board feels the necessity of having an up-to-date Clayton Disinfector for the disinfection of ships coming from infected places.

Such machine should be either set up on a launch or else located on a barge which could be towed by a launch alongside any ship which needed disinfection wholly or partially or the contents of which needed such treatment. The Quarantine Board is not inclined to take any risks so long as proper and adequate means for the disinfection of ships having cargo on board do not exist in this Island, especially inasmuch as the chief trade of the Island is carried on with the United States of North America and not with Great Britain.

Were Plague to break out in this Island it is difficult to say what might be the results financially and what might happen to our Banana trade which, as our greatest asset, should have every consideration paid it from a quarantine point of view.

It is easy to be wise after an event has happened but regrets are of little value as most people find to be the case sometime or other during their lives.

CENTRAL BOARD OF HEALTH.

The work devolving on this Board during the year under review has been unusually heavy. The impetus given to Sanitation tended to largely increase the work, more particularly on the coming into operation in July, 1910, of the Public Health Law—Law 35 of 1910. The Board were asked by the Government to prepare Bye-laws under the several sections of the Law and much time was spent in their preparation.

The Bye-laws were submitted for the consideration of the Parochial Boards, with the view of having a General set of Bye-laws as similar as possible on each section of the subject.

Up to the present time the Bye-laws have not reached a stage of finality, and the Board has now suggested to the Parochial Boards that they should adopt the Bye-laws submitted by the Central Board of Health, or amend or alter them to suit the local conditions of each parish.

It is hoped that some Bye-laws will soon be settled, and that their operation will result in much needed sanitary improvements.

Notice has been received by the Board that Medical Officers of Health have been appointed for the following parishes :

Kingston	Trelawny
St. James	St. Elizabeth
St. Catherine	Clarendon
Portland.	

Eighteen meetings of the Board were held during the year.

SYPHILIS.

It will be seen from the various reports that Syphilis is very prevalent throughout the island. It is exceedingly unfortunate that through ignorance or carelessness, probably the former, the peasantry and labouring classes should pay so little heed to the disease until, as a general rule, it has arrived at its secondary if not tertiary stage.

VOMITING SICKNESS (So called and badly called.)

His Excellency the Governor decided to have an investigation into the above sickness, a disease that annually costs the Island many lives.

On the recommendation of the Research Committee of the Colonial Office, Captain Potter, R.A.M.C., was selected to carry on the necessary investigation and arrived in Jamaica on the 25th December, 1910. During the first fortnight or so of his stay here only an isolated case or two occurred but on 13.1.11, he went to the Parish of Trelawny, when the annual outbreak occurred and in which parish he had an opportunity of seeing many cases, making the village of Duncans his headquarters. Captain Potter spent some days in Manchester in the month of February, but was unfortunate in not seeing any cases at all, so returned again to Trelawny, moving on later to St. Ann's parish, where he saw several cases before the termination of the disease.

It is to be hoped that the "Unexplained Residue" mentioned in the last annual report will be fully explained when Captain Potter's report is put into print.

Until his report is received further remarks are unnecessary.

PUBLIC GENERAL HOSPITALS.

The work generally at these hospitals has been heavy and has been well done.

The daily average of admissions has increased in several hospitals.

Annotto Bay Hospital, which in the year 1909-10 had a daily average of 150.92 had during the year under review a daily average of 192.7.

Port Antonio Hospital's average rose from 114.60 to 136.5.

Sav.-la-Mar's average rose from 29.7 to 87.47, the beds having been increased from 35 to 90.

Port Maria's average rose from 70.55 to 92.80.

Montego Bay's average rose from 12 to 21.85.

Buff Bay's average rose from 19.80 to 32.55.

Mandeville's average rose from 19 to 21.17.

Chapelton's average rose from 28 to 31.70.

INCREASE OF SALARIES OF MATRONS.

The Legislative Council in the month of March passed the Medical Estimates, which I am glad to record included an increase of salary for some of those very hardworked public servants—the matrons of several of the Public General Hospitals—the increases are as follows:—

The salaries of the matrons of—

Port Antonio and Annotto Bay were increased from £36 to £48.

Port Maria and Lionel Town were increased from £36 to £45.

Sav.-la-Mar, Spanish Town and Hordley (if patients reach a certain No.) from 36 to 42.

while the salary of the head nurse at Cave Valley Cottage hospital who acts as matron was raised from £26 to £30.

NEW HOSPITAL.

Linstead hospital, which had been closed on account of retrenchment in the year 1906 was reopened with an allowance of 12 beds.

EXTRA MEDICAL HELP.

A sum of £78 was placed on the Estimates to provide extra Medical assistance for the D.M.O. of Annotto Bay, with a view to helping him to give more care to his daily average of 192.7 patients.

Attached are the usual tables giving the Daily Averages, etc.

TABLE No. 1.

Hospital.	Mortality Rate.	Largest No. daily.	Smallest No. daily	Daily average.	Date of largest daily No. of patients.	Date of smallest daily num- ber of patients.
Morant Bay	4.33	31	16	23.32	28.3.11	5.7.10
Hordley	4.52	31	6	20.3	21.11.10	20.4.10
Port Antonio	.99	202	86	136.55	12.10.10	23.3.11
Buff Bay	7.37	52	17	32.55	28.11.10	22.12.10
Annotto Bay	8.5	282	110	192.77	30.11.10	4.3.11
Port Maria	6.36	125	66	92.80	28.11.10	7.8.10
St. Ann's Bay	5	26	6	18	9.2.11	22.8.10
Cave Valley	Nil.	9	3	6	29.3.11	23.12.10
Falmouth	3	26	6	17	12.7.10	4.10.10
Montego Bay	4.45	30	12	21.85	24.3.11	1.4.10
Lucca	2.9	20	7	15.46	16.3.11	20.6.10
Sav.-la-Mar	4.10	130	45	87.46	24.10.10	7.2.10
Black River	6	29	6	16	11.3.11	5.10.10
Mandeville	10	29	16	21.17	27.2.11	20.5.10
Chapelton	8.5	41	21	32.24	1.4.10	19.10.10
Lionel Town	1.23	114	42	73.91	14.12.10	19.10.10
Spanish Town	6.3	94	48	75.45	13.8.10	27.12.10
Linstead	5.9	12	1	7.2	26.10.10	7.5.10

The following new Works were carried out during the year at the following Hospitals.

MORANT BAY.

Cement was substituted for woodwork in the male and female latrines. Concrete gutters were laid around the latrines. A Sink was placed in the Operating Room and water was laid on.

HORDLEY.

Erection of Matron's quarters.

Enlargement of Store-room and Mortuary.

PORT ANTONIO.

The kitchen was rebuilt.

Piazza on east end of hospital enclosed in wooden latticed screens.

BUFF BAY.

A Verandah was attached to the female ward.

Female bath room arranged with enamelled iron bath and concrete drain to street.

Concrete paving laid behind kitchen.

ANNOTTO BAY.

A portion of No. 4 Male ward (downstairs) was enclosed.

ST. ANNS BAY.

Erection of a waiting shed for out-patients.

Concrete laid down in yard.

CAVE VALLEY.

Hospital removed from Inverness to St. A.

New driving road made to hospital.

FALMOUTH.

A Fire-clay wash basin and slop sink installed in Operating Room. Water laid on to Operating Room, Kitchen, Dispensary, Matron's and Dispenser's quarters.

The addition of new seats and concrete floors to the staff latrines.

MONTEGO BAY.

Increased ventilation of kitchen by addition of new window.

LUCEA.

An open Scullery built on to the kitchen.

Concrete guttering made round two sides of hospital also from kitchen to the main drain gutter.

Installation of a skylight in the Operating room.

New outlet for bath water in bath room.

SAV.-LA-MAR.

Addition of a small bed pan room to No. 1 male ward.

Concrete drains laid round three sides of No. 1 male ward.

BLACK RIVER.

Enlargement of Constabulary ward by removal of a partition and taking in of a Nurses room and part of a female ward, making a larger and better ventilated ward.

Removal of a partition between the two female wards making one better ventilated ward.

Latrines have been built on to the outside of the two male wards with cross ventilation between.

Kitchen floor has been concreted.

Concrete drains have been laid right through the grounds discharging into the sea and the surrounding ground, where necessary raised.

Concrete gutters have been laid all round the Dispensary discharging into the above drain.

Dispensary has been enlarged and a concrete sink installed.

3. CHAPELTON.

Enlargement of Operating Skylights.

4. SPANISH TOWN.

Partial building of new water carriage system of sewerage, including 3 closets, a urinal and a bathroom and lavatory to the male creole wards, 3 closets, a bathroom and lavatory to the female ward and closets and bathroom to the male coolie wards, and closet to the female coolie ward—these coolie closets were chosen during my absence on leave, by the Medical Officer in charge of the hospital.

MANDEVILLE.

New Latrine and bed pan room has been built on to the outside of the female ward with cross ventilation between.

LEPERS HOME.

A door was constructed in kitchen leading to the female division. The lavatory was reconstructed.

FISH POND.

The Fish pond in the Island Medical Office garden has provided several tanks and ponds with "millions" during the year.

WATER SUPPLIES.

It gives me much pleasure to record the fact that Public water supplies have been installed at the villages of Annotto Bay and Mandeville. The hospitals located in these two villages will greatly benefit thereby.

The following Hospitals received Bedsteads and Cots :—

Iron Soldier Beds—

Annotto Bay 20; Port Antonio 35; Linstead 5; Sav-la-Mar 10; Spanish Town 20.

Fracture beds with self-lifters—

Linstead 1; Mandeville 3; Lucea 1; Hordley 1; Falmouth 1; Chapelton 3; Montego Bay 1.

Spring bedsteads—

Linstead 10; Mandeville 7; Lucea 1; Falmouth 5; St. Anns Bay 2; Chapelton 2; Montego Bay 7; Morant Bay 8.

Cots—

Annotto Bay 30.

HEALTH LAW—LAW 35 OF 1910.

Law 35 of 1910 passed its third reading of Friday June 10th, 1910.

A rough draft of a Health Law was first drawn up during my vacation in the Autumn of 1908 in response to a request by His Excellency the Governor early in that year that I should consolidate the Health Laws of the Island. Unfortunately, owing to the late Hon. Attorney General's illness, nothing came of it. During His Excellency's absence on leave in the summer of 1909, I was asked by His Excellency the Acting Governor to draw up another one.

Law 6 of 1867 was then revised but not meeting with approval, a third Law was drawn up in Chapters, only four of which appeared in print.

Finally, in order to pass the Bill, parts 2 and 4 were dropped altogether and parts 1 and 3 greatly shortened—part 3 being practically turned into the Power to make Bye-laws on certain subjects.

Due to the shortening of the law many things were left out that would have been better left in the law and many useful amendments might have been added had there been time for full discussion to take place.

However, the Session of Council had been an extremely long and tedious one lasting into the month of June and it was considered better to drop some things than extend the Session indefinitely or drop the bill entirely. The deletion of Section 4 of the original bill and its substitution by another will, it seems to me, very seriously damage the proper working of the Bill.

Section No. 4 in the original bill had allowed for the appointment of permanent Superintending Medical Inspectors whom the Central Board could at any time call upon to report to them and give them information or investigate whatever disease might be present in any district.

Section 4 as amended only gives His Excellency the Governor the right to appoint these Inspectors from time to time for special duty or temporary work.

The Central Board of Health remains much in the same position therefore as before under Law 6 of 1867, in other words practically only an Advisory Board, with little or no power of action, or even of informing itself properly of what is going on.

Sometime before the meeting of Council at which the bill was passed a deputation from the Central Board had waited on His Excellency the Governor and had stated that in their opinion such appointments were necessary and that they did not think that the work could be done effectually by the District Medical Officers whose time must necessarily be given up to a great extent to private practice.

However, inasmuch as Section 4 was changed in Council, there was nothing for it but to recommend that the District Medical Officers be appointed part time Health Officers, otherwise there would be no one to advise on sanitation in the Parishes at all.

The result must naturally be that if special appointments are, from time to time made, it may happen that one person may be appointed and then another and there will be no sequence of events at all and the officer appointed may not even have the confidence of the Central Board.

The appointment of part time officers cannot in any manner make up for the loss of whole time ones.

However, the Bill as passed is an advance on Law 6 of 1867 and brings our Health Laws more up to date.

BACTERIOLOGIST.

It is pleasant to be able to record the fact that, at last Jamaica has had added to its medical staff a Bacteriologist of high medical attainments, an M.D. of London University and one who gained a portion of his education in that most excellent training place for Bacteriologists and Hygienists the Royal Army Medical Department.

There is no doubt that such an appointment is satisfactory to the profession at large and will be found, as it has already been found, to be of very great use.

Jamaica can now congratulate itself on at last being equipped, in this matter, with an officer that other West Indian Colonies have found necessary.

The only wonder is how the Island managed to get on so long without a medically trained Government Bacteriologist, while other smaller West Indian Colonies possessed one

YAWS.

The following is a return with the cost of Yaws cases treated during the present and several previous years :—

Year.	Cases.	Cost.
1905-6	1,554	£211 9 6
1906-7	1,923	432 13 3
1907-8	2,853	384 18 0
1908-9	5,332	797 4 10
1909-10	4,555	723 1 9
1910-11	7,313	1,265 2 11

The increased number of cases is due to the increased attention being given to persons suffering from this disease.

The parishes in which Yaws cases have been most frequent during the year are the following :—

St. Catherine, Portland, Hanover, St. Thomas, St. Mary.

VACCINATION.

The following returns show the number of Vaccinations performed during the past and several preceding years.

Year.	Successful.	Unsuccessful.	Did not return.	D.M.O.	Constables.	Registrars.	Totals.
				£ s. d.	£ s. d.	£ s. s.	£ s. d.
1905-6 ..	29,112	625	468				1,672 1 7½
1906-7 ..	24,470	404	345	1,323 16 0	338 12 1	245 10 5	1,907 10 11
1907-8 ..	22,916	524	392	915 15 0	236 14 9	220 19 8	1,372 19 5
1908-9 ..	21,662	705	562	970 14 0	254 8 8	226 0 1	1,451 2 9
1909-10 ..	22,786	653	461	1,054 8 0	279 5 8	257 1 1	1,590 14 9
1910-11 ..	23,106	617	559	993 5 0	259 1 3	246 17 4	1,499 2 7

The District Medical Officers have stated in no uncertain voice that, although the children of this Island are efficiently protected against small-pox, the adult population is very inefficiently if at all so protected.

MICROSCOPES.

During the year two hospitals have been supplied with microscopes and it is to be hoped that they will be made good use of.

It is intended that the Bacteriologist shall give the Dispensary students instruction in the use of the microscope, so that when they are qualified and go out as Dispensers either to the Public Institutions or to private practitioners they may be doubly useful by being able to help in the diagnosis of diseases, such for instance as Hookworm disease, malaria and phthisis.

The desire is not to make them experts by any means, but to make them of more value to the Medical Practitioner and consequently to the public. Such knowledge may possibly lead to their obtaining better remuneration.

OUTPATIENTS.

A large number were treated by the D.M.O.'s in their several districts. The number so dealt with during the past 3 years was as follows:—

	1908-9.	1909-10.	1910-11.
Constables	2,527	2,644	2,414
Prisoners	3,365	2,906	2,902
Pauper Visits	15,108	17,980	23,003
Immigrants	10,406	5,175	11,671
Parochial Midwifery cases ..	86	65	87
	31,492	28,770	40,077

Return showing the number of Tickets issued during the year under the system of affording medical aid at moderate rates to poor persons not on the Pauper roll.

Parish.	1/	2/	3/
Kingston	280	130	—
St. Andrew	—	10	—
St. Thomas	—	21	8
Portland	—	7	—
St. Mary	—	40	4
St. Ann	—	63	129
Trelawny	—	16	—
St. James	—	3	—
Hanover	—	14	—
Westmoreland	—	15	—
St. Elizabeth	—	5	—
Manchester	—	72	1
St. Catherine	—	25	—
	280	421	142

TOTAL NUMBER OF PATIENTS TREATED.

The total numbers of patients treated in Public General hospitals during the year under review as compiled from the Nosological Returns submitted by the D. M. O.'s were:—

Cases 22,962, Deaths 446, giving a death rate of 1.9.

The number of operations performed were 3,104, with 27 deaths, showing a death rate of .89. Among the number of patients treated was as below:—

Constables	..	..	..	..	640
Paupers	..	..	..	..	53
Poor Persons	..	..	..	..	6,286
Coolies	..	..	..	..	15,647
Prisoners	..	..	..	..	7
Paying Patients	..	..	..	..	92

Return showing the number of cases prosecuted, at the instance of the Constabulary, for violation of Law 34 of 1894—The Drugs and Poisons Law—during the year ended 31st March, 1911.

Parish.	Title of Case.	Nature of Offence.	Date of Trial.	Result.	Remarks.
Kingston	Rex v D. Henderson	Selling poisons contrary to the Drugs & Poisons Law.	29.6.10	Case dismissed	
"	do	do	do	Case withdrawn	On suggestion of Court
"	do	do	do	do	do
"	Rex v L. de Cordova	do	do	do	do
"	do	do	do	do	do
St. Catherine	A. A. Phillips	Leaving open under the charge of an unlicensed person, that part of his store where Drugs & Poisons are sold.	10.8.10	Case dismissed	

HOO-K-WORM DISEASE.

Herewith are appended returns from the various Medical Officers attached to the Department on the prevalence of the above disease, as well as a very interesting report from Dr. Grabham, Medical Officer in charge of the General Penitentiary.

Hook-worm disease is evidently much more prevalent than has been generally supposed, not only among East Indians but also among the creole population and many cases of anæmia which might be attributed to malaria will in future be found to be due to Hook-worm disease.

The Medical Officer in charge of the Spanish Town Prison has been asked to systematically examine prisoners admitted therein, with a view of finding out whether they harbour the worms or not.

Since making a routine examination of prisoners the latter officer states that he is of opinion that fully 50% harbour the worm.

Reports on the Prevalence of Hook-Worm Disease.

Parish and District or Institution.	If East Indians are resident to any extent.	Is the disease increasing.	Number of cases seen in 1910-1911.	Remarks.
KINGSTON— Kingston ..	No	..	..	Dr Gifford states that he has met with no cases.
Public Hospital ..	No	..	0	See Dr. Grabham's separate report.
Penitentiary ..	No	..	..
ST. ANDREW— Stony Hill ..	No	Endemic	20 or 30	Dr. Turton states that the disease is endemic and exists all over the district.
Lower St. Andrew	No	Not known to exist	0	
Gordon Town ..	No	not known to exist	0	
ST. THOMAS— Morant Bay ..	Yes	No	1	Dr. Moseley states that:— (a) the disease exists among the Indentured and 2nd term Coolies, fully two-thirds of whom he thinks harbour the worm; (b) the disease is not recognised unless a microscopical examination is made of the stools; (c) 99 per cent. of anæmia cases existing among Coolies are due to this worm; (d) he has in past time found ova in the stools of Creole patients from Nonsuch and Barridale in the Cooper's Hill district; (e) the coloured Creole population seem less resistant to the disease than are the black Creole population as he has only found ova in the stools of the former; (f) he has not seen the disease among Creole patients during the year under review; (g) thymol is administered as a routine treatment to all admissions to hospital whose symptoms are at all suggestive of Hook-Worm disease.
Plantain Garden ..	Yes	No	2 at most	
River				
Hagley Gap ..	No	Not known to exist	0	
PORTLAND— Port Antonio ..	Yes	No—probably decreasing	about 100	
Bu ^a Bay ..	Yes	Probably the contrary	2	
Hope Bay ..	Yes	Has verified no cases	..	Dr. Clarke states that he thinks that the disease is more prevalent than is supposed to be the case but that he has not verified the diagnosis of any of the cases he suspected to be suffering from the diseases.
ST. MARY— Annotto Bay ..	Yes	More cases seen this year	20 to 30	Dr. Ritchie states that, in his district the disease is chiefly met with among East Indians.

Reports on the Prevalence of Hook-Worm Disease.

Parish and District or Institution.	If East Indians are resident to any extent	Is the disease increasing.	Number of cases seen in 1910-1911.	Remarks.
St. Mary— Richmond ..	Yes	Thinks not	6 or 8	Dr. Malabre states that the disease exists mostly among East Indians and that it may have been present among others whose symptoms were not sufficiently pronounced as to lead to an examination of the stools. (No hospital exists in this district. Ed.)
Port Maria ..	Yes	Thinks not	4	Dr. W. G. Farquharson states that his cases were East Indians.
Gayle ..	No	Cannot say	2	Dr. Lecesne states that characteristic ova have been found in 2 cases and that he has been unable to obtain a specimen of the worm so cannot describe the variety. (No hospital exists in this district. Ed.)
St. ANN— Moneague ..	No	Not known	to exist	Dr. Hargreaves states that several cases of progressive anæmia exist among the poor white children in his district but that he has been unable to find ova in their stools.
Cave Valley ..	No	Thinks not	3 or 4	
St. Ann's Bay ..	No	Thinks not	2	
				Dr. Joslen appends a list of those seen for the year 1910-1911 and for several years previously: 1906—2. 1907—0. 1908—7. 1909—5. 1910—2. Total—16.
TRELAWNY— Falmouth ..	No	Not known to exist	0	Dr. Johnston states that he has since arriving at Adelphi so far examined the stools of 11 coloured Jamaicans suffering from anæmia and found the ova in 9 cases and that he examined the fæces of 10 Coolies living at Latium and found that every one contained ova.
Ulster Spring ..	No	Not known to exist	0	
Duncans ..	No	Not known to exist	0	
ST. JAMES— Montego Bay ..	No	Thinks not	6	
Adelphi ..	No	—	19	
HANOVER— Lucea ..	No	Not known to exist	0	
WESTMORELAND— Savanna-la-Mar ..	Yes	—	0	Dr. Harvey states that he has not seen a case for over a year.
Little London ..	Yes	Thinks not	3	Dr. Sinclair states that the cases were East Indians.
Grange Hill ..	Yes	Not known to exist	0	
Lambs River ..	No	Thinks not	1 ?	Dr. Stafford found no ova.
ST. ELIZABETH— Black River ..	No	Not known to exist	..	

Reports on the Prevalence of Hook-Worm Disease.

Parish and District or Institution	If East Indians are resident to any extent	Is the disease increasing.	Number of cases seen in 1910-1911.	Remarks.
ST. ELIZABETH— Balaclava ..	No	Thinks not	3	These cases were seen by Dr. Calder in the Santa Cruz district but came from the Siloah part of Balaclava district.
Santa Cruz ..	No	Thinks not	1	
CLARENDON— Vere ..	Yes	Yes	17	Dr. Tillman states that the disease exists among both Creoles and Coolies in the district.
May Pen ..	No	Not known to exist	0	
Chapelton ..	No	Does not know	1	
Crofts Hill ..	Yes (Worthy Park)	Does not exist as far as is known	0	
MANCHESTER Newport ..	No	Not known to exist	0	Dr. Halliday states that marked cases of anæmia do exist which may be due to Hook-Worm disease.
Mandeville ..	No	Not known to exist	0	
Christiana ..	No	Thinks probably the contrary	Several	
ST. CATHERINE— Old Harbour ..	No	Not known to exist	0	
Linstead ..	Yes	Not known to exist	0	
Spanish Town ..	Yes	Not known to exist	0	
Spanish Town Hospital ..	..	No cases have been recognised	0
Spanish Town Prison ..	..	..	..

NOTE ON ANKYLOSTOMIASIS (HOOK-WORM DISEASE) IN PRISONERS SENT TO THE PENITENTIARY.

With a view of ascertaining what percentage of new prisoners are infected with Ankylostomiasis, all prisoners on admission—except habitual criminals and those from Kingston and Montego Bay—have recently been systematically treated with Thymol and their dejecta in every case examined for hook-worm and other nematodes.

The investigation began in January and is being continued. Some particulars of the 71 cases examined up to the 31st March, 1911, are given below.

On arrival the prisoners are placed on a milk diet for two days prior to treatment; on the third day they are given two thirty grain doses of Thymol, one at 9 a.m. the other at 11 a.m.; at 1 p.m. a large dose of Epsom salts is given; the stools are examined the same evening or on the following morning. 51 or over 70% were found to be infected with hook-worm.

Of this number two were profoundly anæmic and presented all the pathognomonic signs of the disease in its most advanced stage: fifteen were moderately anæmic; a feature in many

of these cases was the continued fever they suffered from; the rest appeared healthy although very large numbers of hook-worms were expelled from many of them.

Most of the infected cases belonged to the bare-footed agricultural labouring class: they invariably stated that they had recently suffered from 'ground itch,' a disorder which seemed to be well known to all of them: it was also evident from the composition of the stools that the majority of them were addicted to dirt-eating (geophagism).

The following list shews that practically all of them came from moist districts. Considering its wide distribution, it would certainly appear that the disease must be very general through the island and cause a large amount of disability ending fatally in many cases. Young children, especially, must fall easy victims. It is probably either directly or indirectly the most destructive disease among the agricultural labouring class in this island, even more so than malaria.

Thymolising stations, such as have been established in the infected areas of Porto Rico, would probably prove highly beneficial here; infected individuals must be treated under supervision, the random distribution of Thymol among such a class would be practically useless. The physical improvement shewn in the prisoners who have been treated in the Penitentiary has been remarkable.

Localities from which the hook-worm infected prisoners came:—

Trelawny	..	Ulster Spring, Clark's Town (2).
St. James	..	Springfield, Rock River, Good Hope, Cambridge, Montpelier (2), Leyden, Chesterfield.
Clarendon	..	Frankfield (2), Mocho (3), Blackwood, Milk River, Rock River, Chapelton, Cross, Farm.
St. Mary	..	Mahoe Hill, Annotto Bay (2), Albany, Belfield, Richmond, Friendship.
Hanover	..	Kendal, Dias, Fat Hog Quarters.
St. Catherine	..	Above Rocks, Guys Hill (2), Williamsfield.
St. Elizabeth	..	Mulgrave, Slipe, Balaclava.
St. Ann	..	Liberty, Priory, Alexandria, Davis Town.
Westmoreland	..	Ashton, Cave, Little London.
Portland	..	Best Works (2), Oakley.
Manchester	..	Christiana, Porus

The negative cases, for the most part, came from seaside towns and reputedly dry places some had habitually worn boots. Both the Old World and New World hook-worm (*Ankylostoma duodenale* and *Necator americanus* were found. Remarkably few other nematodes were found *Ascaris lumbricoides* (5 cases); *Trichuris trichiura* (2 cases) and *Oxyuris vermicularis* (3 cases).

Historical.—Remarkable accounts on the dirt-eating habit and its destructive course are given by several of the Jamaica physicians who wrote at the end of the 18th and beginning of the last century. Similar observations among the negroes in the Southern States are recorded about the same period.

Dr. John Hunter, 1788, paid some attention to the disease when he was in Jamaica, 1781-1783, and concluded that "it appeared to be more a disorder of the mind than of the body." This opinion appears to have been generally held by contemporary writers. Some idea of the mortality occasioned by this disorder is given by Hunter, who states that "on many estates half the number of deaths on a moderate computation are owing to this cause."

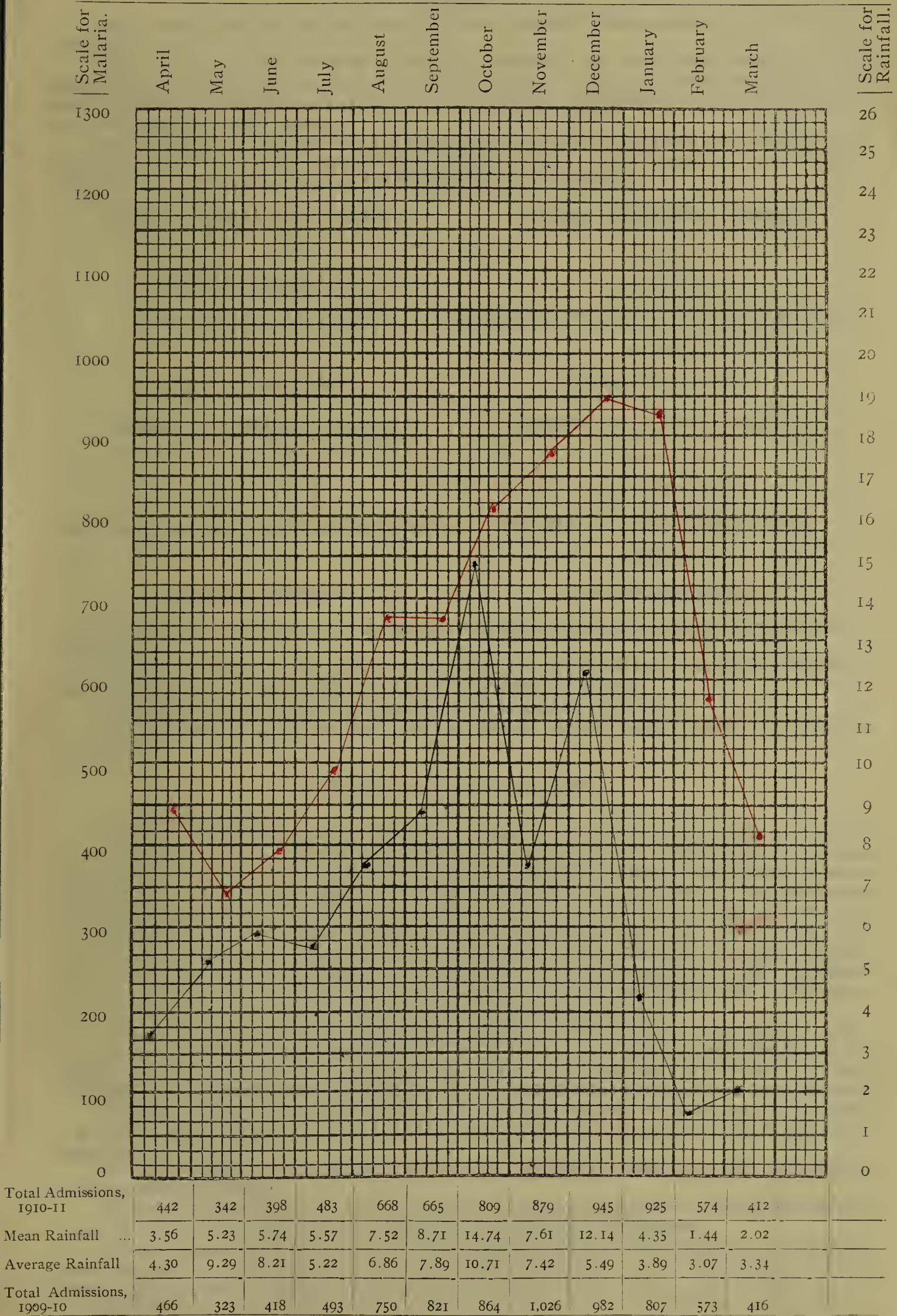
Dancer, 1819, says that "it has become much more prevalent since the large importation of Angola negroes, who are more particularly addicted to dirt-eating than any others. Dirt-eating prevails more in wet than in dry parishes. In the year 1783, John McGillivray, Esq., a provincial Colonel, well known for his brave character, brought here from Georgia between three and four hundred negroes, who were for some time employed on the public fortifications carrying on, and were in the highest state of health during the hard labour they were employed in, but when he afterwards settled in St. Thomas in the East they took to dirt-eating. No cause could be assigned for this but their having lost the hope of returning to America; their owner being as humane and kind-hearted a man as ever lived, did everything to please and satisfy them; he exacted little or no labour from them, he furnished them with the greatest plenty of pork, beef, rice, flour, etc., notwithstanding they were in possession of hogs, poultry, etc., of their own. To contribute to their amusement, he built a dancing room, and furnished them with fiddlers; but the malady was incurable, he lost above one hundred negroes."

The whole train of symptoms detailed by these writers are highly suggestive, in the light of later knowledge, of hook-worm infection. The worm itself was not discovered until 1838. The disease has insidiously established itself in many agricultural centres through the island, and it is not improbable that new foci have been formed by hook-worm-infected East Indian immigrants who have been brought here in late years. That the disease has not received the attention it merits is clearly shewn by the scanty references to it in the reports of the Registrar General and Medical Department.

Table showing the number of admissions for Malaria per month to the various General Hospitals in Jamaica during the Financial year 1910-11.

----	April.	May.	June.	July.	August.	September.	October.	November.	December.	January.	February.	March.	Total.
Morant Bay	4	5	9	9	10	8	19	16	19	14	5	10	128
Hordley	6	5	12	8	15	18	12	29	18	20	17	16	176
Port Antonio	58	33	73	120	191	183	190	125	141	104	46	55	1,319
Buff Bay	13	16	13	17	19	31	34	35	47	37	30	17	309
Annotto Bay	134	118	147	169	220	200	238	272	285	365	231	146	2,525
Port Maria	24	28	16	13	28	43	55	66	62	74	58	27	494
St. Ann's Bay	5	0	1	1	0	1	3	3	7	10	9	6	46
Cave Valley	0	0	0	0	0	0	0	0	0	0	0	0	0
Falmouth	1	4	4	0	1	0	3	0	6	2	2	3	26
Montego Bay	3	2	0	2	2	6	7	10	8	6	10	11	67
Lucea	1	3	1	3	4	2	3	1	2	3	2	3	28
Sav.-la-Mar	48	22	28	41	66	67	83	68	67	64	38	42	634
Black River	1	0	1	0	1	7	2	4	5	2	3	1	27
Mandeville	1	0	0	0	0	1	2	1	0	1	0	0	6
Chapelton	4	4	3	1	2	1	1	1	1	0	0	2	20
Lionel Town	85	59	45	34	24	25	49	93	104	90	48	40	696
Spanish Town	30	29	18	34	44	34	40	64	52	36	25	17	423
Linstead	0	0	2	0	2	4	2	3	2	0	2	1	18
P. Hosp. Kingston	24	14	25	31	39	34	66	88	119	97	48	15	600
Total	442	342	398	483	668	665	809	879	945	925	574	412	7,542

Chart showing the monthly number of admissions to the Public Hospitals in Jamaica for Malaria as well as the monthly Rainfall during the Financial year, 1910-11.



QUININE.

The amount of quinine sent out from the Island Medical Office has very largely increased this year.

The system of selling the drug in farthing packets at the Post Offices throughout the Island has been introduced and up to March 31st, 1910, the value of amount sent to the Postmaster General for distribution was £143 8s. 1d., which represented 167,075 farthing packets each containing a 5 grain tablet.

Small packets are now also being distributed for children of 9 years and under 14, containing a 3 grain tablet, of 5 years and under 9 containing a 2 grain tablet, of under 5 years containing a 1 grain tablet, each packet being sold for one farthing.

MEDICAL DEPARTMENT, JAMAICA.

MEDICAL DEPARTMENT, JAMAICA.

QUININE (GRAINS V.)

QUININE.

One Dose for an Adult.

One Dose for a Child of 9 Years and under 14

Price ONE FARTHING.

Price ONE FARTHING.

MEDICAL DEPARTMENT, JAMAICA.

MEDICAL DEPARTMENT, JAMAICA.

QUININE.

QUININE.

One Dose for a Child of 5 Years and under 9.

One Dose for a Child under 5 Years.

Price ONE FARTHING.

Price ONE FARTHING.

The amount of quinine sold to the Estates for distribution to labourers was 133 pounds by weight.

The quantity issued to the Malaria Commission, most of which has been sent by Mrs. H. C. Bourne for distribution in the Schools, totalled 141 pounds 4 ounces.

The Police Department were given 4,350 farthing packets to sell.

The Agricultural Society has been sent 560 farthing packets to sell through its travelling Instructors.

PRECIS OF D.M.O.'S REPORTS.

Dr. Gifford sates that—

Generally the health of Kingston was good—there was neither excessive rain nor drought—the rainfall was 35.97 and near 50% less than the previous year—Influenza of a mild type prevailed in January and February—Whooping Cough was met with among children, in some cases fatal—parents are not sufficiently careful in isolating this class of case. Sporadic cases of measles occurred, but no epidemic. One case of Diphtheria was notified only—malaria was less prevalent—the free distribution of quinine, the cheapness of the drugs at Post Offices and Police Stations and the general sanitary overhauling have all contributed to the improved conditions—the mild seasons and restricted rainfall must have helped considerably also. It is pleasant to be able to record the marked improvements in the city's sanitation both in respect of street construction and drainage, especially in the western portion.

Phthisis still maintains its bad pre-eminence as one of the most fatal diseases in the district—the existing method of dealing with this disease is unsatisfactory and should not be allowed to continue—it is to be hoped that the sanitary wave now passing over the Island will not spend itself entirely until some proper means of coping with the disease has been adopted.

Enteric fever claimed 100 deaths and it is to be hoped that the investigation now proceeding will trace the disease to its source and be able to offer some suggestions for its arrest and suppression.

Veneral diseases are as prevalent as ever and the sufferers exhibited their usual apathy and indifference to them.

Neuritis still furnishes its quota to the Pauper List and Almshouses—and its pathology still needs to be cleared up offering a rich reward to the successful investigator.

Of its therapeutics nothing is known but perhaps Ehrlich's wonderful discovery Salverson, now regarded by the Public as a sort of "Universal panacea," if not the genuine "Elixir Vitæ," may be found to have satisfactory application here.

Mortality rate was higher than in the previous year, 36.03 per 1,000 as against 33.32. 1,144 vaccinations were performed, no re-vaccinations.

GORDON TOWN, ST. ANDREW.

Dr. Rogers reports that a stagnant pool close to Gordon Town where a collection of water settles in a gully, the outlet being higher than the pool, has been reported to the Parochial Board with apparently so far no result.

Some cases of whooping cough occurred, no deaths.

There were 12 cases of pneumonia with 1 death, cases of dysentery and four cases of malaria occurred, all the latter imported. Cases of Yaws are plentiful in the elevated districts.

STONY HILL.

Dr. Turton states that :

German measles, whooping cough and chicken pox have been prevalent.

(a) The water supply still remains a source of possible danger to the Public Health, polluted as it is at its area of supply by latrines, stable-yards, road-washings, household refuse, etc. If earth filtration breaks down at a critical moment a serious outbreak of disease would occur. This water supply is a Spring from which the people take their supply. The Parochial Board has considered the question of a water supply, which has often been reported on by himself and his predecessor, but the question seems hung up, probably for financial reasons.

There is also a small overflow from the Industrial School premises at the back end, there is also the Wag Water River—neither of these is much used except by people living near—the first named Spring being more centrally situated.

No marked mortality, although the whooping cough probably increased the Infantile Death rate.

During first three quarters of year rain was fairly regular, last quarter was dry.

Ankylostoma, as mentioned in his last report, is prevalent all over the district; since then there has certainly been some increase, and he is convinced that many of the cases of inability to work are due to this infection. Many persons harbour the parasite without showing any apparent ill effects, but he is convinced that many long standing cases of debility showing no gross symptoms have been found to be infected and excellent results followed treatment.

Yaws have decreased although there are still many scattered cases.

Little malaria and most cases seen were imported.

There were 4 or 5 cases of vomiting sickness in last quarter; two were investigated by Captain Potter, R.A.M.C.

Infants are fairly well vaccinated but adults are inadequately protected. As in Germany, if children are compulsorily vaccinated during their last school year the rising generation would have a satisfactory protection against small-pox there always exists the chance that the introduction of a mild case may start a serious epidemic.

LOWER ST. ANDREW.

Dr. Edwards states that :

There was an epidemic of whooping cough, not severe but general. Otherwise health of district was good.

Of the cases admitted to the Almshouse the rate per cent. of Neuritis, Phthisis and Syphilis was 16, 8, and 5, respectively.

Number of inmates nearly doubled in three years.

Death rate has been reduced nearly 28% in that period.

HAGLEY GAP, ST. THOMAS.

Dr. Sharp states that the prevailing illness in the lower parts of his district is malaria which is worse after the rainy seasons. That Whooping Cough has been prevalent among children and that Elephantiasis is not frequently met with.

MORANT BAY.

Dr. Bartlett states that :

Whooping cough has been prevalent, with some infant mortality.

Malaria of the benign tertian type has been common, also a few cases of quartan fever. A drought took place from January to March and Malaria was less in evidence.

The systematic treatment of Yaws has resulted in appreciable benefit. Syphilis accounts for a large proportion of destitution; and it is extraordinary how long a peasant will nurse a syphilitic ulcer of leg totally incapacitating him for work, which a few days lying up would have sufficed to cure.

Vaccination is carried on with a fair amount of thoroughness. Owing to the scattered nature of the population and inaccessibility of many dwellings it is somewhat easy to evade the district constable.

PLANTAIN GARDEN RIVER.

Dr. Evans states that :

The year has been a fairly healthy one.

Whooping cough was epidemic.

The usual number of cases of malaria treated were milder than usual, probably due to the sale of quinine and the distribution to school children.

Juveniles are well protected from small-pox.

PORT ANTONIO—PORTLAND.

Dr. Moseley reports to the following effect :—

Apart from the usual increase in number of malarial cases during summer, there was no special prevalence of sickness.

Malaria reached its height in September and was of a mild type, of 1,319 cases only two died.

Twenty-five cases of enteric fever notified, all were in hospital, five ending fatally, two cases were seamen from ships. The majority of the rest had recently come from other parts of the island bringing disease with them.

Four cases treated at Orange River, all residents, three of them of one family who obtained water from a small branch of the Orange River, a latrine opens not far off, the drainage passing into the water supply, hence the cause.

Considering the population, the cases of enteric were not numerous.

Whooping cough was prevalent, cases mostly mild.

A few cases of chicken pox were seen.

Syphilis is plentiful, about 10 per cent. of creoles in hospital suffer from this disease.

About 400 cases of yaws treated, the results are encouraging.

The juveniles are well protected against small pox; it would be a grave mistake to abolish vaccination on the grounds that re-vaccination does not exist. It would be better to re-vaccinate compulsorily.

Steady improvement has taken place in sanitary condition of the town. The Titchfield lands have had more attention shown them, they are better drained and a large area near the mouth of the Cane Side River has been filled in, trenches have been regularly oiled and kept free from rubbish and undergrowth. It is to be hoped that the Trust will turn its attention to the lands on the east of the town.

The water supply of the town was a source of uneasiness to many of its inhabitants for several months.

It will be remembered that early in the year, the new reservoir was put in use. Owing to the presence of a large amount of decaying vegetable matter, the water had a disagreeable smell and came to have a slightly greenish colour, and further, an adverse opinion was given regarding it after an analysis. Parkes and Kenwood in their "Hygiene and Public Health" say "occasionally the water of open reservoirs becomes contaminated by the growth, and the subsequent decay of algae and other microscopic organisms. In some instances so abundant is the organism that the water becomes coloured red or green blue, and is also turbid and evil smelling. Beyond the unpleasantness rising from the odour and turbidity, it does not appear that this contamination induces any injurious effects on the consumers. He does not suppose any sanitary authority on the face of the earth would question an opinion expressed by the authors of "Hygiene and Public Health." The quotation above covers all that is to be said, about the Port Antonio water supply. Intestinal troubles were not more prevalent when the water had the bluish green appearance than at any other time, nor was the case of enteric directly traceable to the water supply, at least so far as my experience goes.

Calls attention to required sanitation of stables within the town. Comments on a two horsed stable within 30 yards of the hospital, no attempt being made to get rid of the urine, or of manure which lies in a heap in the yard perhaps a week or two. West Street was constructed some years ago, the population has doubtless nearly doubled since, there are no sidewalks and it is well nigh impassable at night owing to the people collecting in front of taverns and at street corners, this should be put an end to.

Great need to improve the method of dealing with night soil, carrying it about in uncovered buckets is hardly sanitary.

An isolation hospital should be provided, as cases may come from abroad needing isolation and before proper provision could be made an incalculable amount of mischief might be done. Everything should be quite ready prepared in event of a case of plague occurring.

Useful work has been done by P. B. in putting down surface drains.

BUFF BAY.

Dr. George states that :

No severe outbreak of sickness has occurred.

Several cases of tertiary or congenital syphilis have been attended, but only one primary.

Two cases of enteric have occurred.

Yaws flourished, but the distribution of medicines is being put into the hands of other reliable persons besides policemen and it is hoped that the disease will soon be stamped out.

Sanitary conditions of towns fairly good, in spite of there being neither public water supply nor satisfactory system of sewerage disposal.

The Sanitary Officer has his hands full in compelling people to get rid of stagnant water and rank vegetation.

Infants are well protected against smallpox, the adults are not.

RICHMOND.

Dr. Malabre reports as follows :—

The only epidemic of any importance was one of Whooping Cough, but only the graver cases were seen by him, mortality was not excessive.

Malarial cases seen have diminished, but it is difficult to say whether this is due to actual diminution, or to cases being treated by quinine bought at the post offices.

The sanitary condition of Highgate and Richmond has improved—old shanties are being pulled down in the latter place and better premises erected—there is an attempt at drainage being made in these villages. A water supply is particularly needed. Neither the prolonged and heavy rains nor the succeeding spell of dry weather seems to have affected the public health.

The children are well protected against small-pox, but one cannot say the same of adults. Many cases of Yaws have been seen.

ANNOTTO BAY.

Dr. Ritchie reports as follows :—

There was no epidemic during the year. Malaria was much more prevalent following an unusually heavy rainfall and cases of very severe bilious remittent fever were often seen.

Cases of pneumonia appeared during the same period. Pulmonary Tuberculosis was observed throughout the year. Only three cases of Enteric Fever were seen. A public water supply has been laid on to the town, but pools of water, the result of drippings from taps, are very noticeable. A system of surface drains is necessary in order to carry away storm and other water, a matter that may be difficult of accomplishment, however. The principal breeding places of mosquitoes have been kept fairly clean and he has at times found it difficult to collect anopheline larvæ where once they were abundant.

PORT MARIA.

Dr. W. G. Farquharson states :—

General health has been fair considering the lamentable sanitary conditions—little has yet been done to improve such conditions and that little in areas of secondary importance. Warner's pond still exists, as extensive and offensive as before. Until landowners dispose of some of their land and allow the general population to provide themselves with suitable residences instead of along the stagnant river and offensive swamp little can be done. The interests of the 3,000 inhabitants of Port Maria seem to be neglected for the benefit of a few landowners.

Malaria is the most prevalent disease. 494 cases treated in hospital and probably four times as many outside. During November, December, January and February, possibly due to the continuous rains, the number of cases increased enormously and formed two-third of the number of cases admitted to hospital.

In some cases the attacks were so severe that the usual quinine treatment has almost been of no use. The similarity of some cases to Typhoid fever has been admitted by all Practitioners in the district. Malarial fever is usually tertian or Quartan. Suggests large hospitals being supplied with material for Bacteriological research—deaths from malaria are few. Venereal diseases and Yaws have been prevalent—of the latter only a few cases may not be under treatment as a regular crusade has been waged.

Anæmia and ankylostomiasis have been very prevalent—when cases with the latter conditions have come under regular and systematic treatment fairly good results have been obtained.

No Vomiting Sickness.

Gastric derangements have been serious.

Vaccination has been regularly performed.

Port Maria by means of sanitation should become by the expenditure of some hundreds of pounds one of the healthiest places in the Island.

GAYLE.

Dr. Lecesne states that :

One case of Enteric Fever was reported but he has reason to believe that other fatal cases occurred not reported.

Malaria was much less prevalent in spite of prolonged heavy weather.

Syphilis is very prevalent and when it is remembered that this disease is accountable for nearly all the interrupted pregnancies attended and that every congenital syphilitic born is preceded by two or more premature births, one can see how the disease lowers the birth rate even more than it increases the infantile mortality rate.

Yaws is not quite so prevalent—greater readiness being shown in bringing out children for treatment—the Law of 1910 seems to have borne fruit.

Whooping cough was mildly epidemic, although Broncho-Pneumonia claimed some victims.

Complains of the superstition prevalent among the peasantry, who look upon fevers as due to evil spirits and exercise them by fumes of burning cloth—the district is full of obeah men, etc., trading on these superstitions—owing to the terror in which these characters are held evidence cannot be collected against them. Parents should be prosecuted who prefer the obeahman to medical assistance. Burial without a medical certificate should be made an offence against the law. Gayle the chief village is not in a sanitary condition—the two springs which have been declared by the Parochial Boards to be Public water supplies should be protected.

Infants are fairly well protected against small pox.

CLAREMONT, ST. ANN.

Dr. Ff. Mullen states as follows:—

That the health of his district has been good; that several cases of enteric fever have occurred and several of the so-called vomiting sickness. A fruitful source of illness is the drinking of pond water.

Gastric trouble is common and malaria rare. Every opportunity is taken of instructing parents as to the proper clothing and feeding of children.

CAVE VALLEY AND BROWN'S TOWN.

Dr. Hargreaves states that:

The general health has been satisfactory. During October and November there was a good deal of malaria in Cave Valley but of a milder type than last year. In September an outbreak of dysentery occurred, very severe especially in Green Hill—a Sanitary Inspector was detailed for the work and instructed in the duties of preventing the spread of the disease. He did his work remarkably well. Venereal diseases are very prevalent and the increasing necessity for Parochial relief is undoubtedly due to syphilitic disease and neglected Gonorrhœas. The results so far as the health of young men are concerned are bad. The successful treatment of Yaws depends greatly on the diligence of the District Constables and the intelligence of the parents and guardians of children.

Natural advantages help sanitation in Brown's Town, but more care should be taken in keeping back-yards clear from decaying vegetable matter, old bottles, tins, etc. The Public Water Supply of Brown's Town needs more supervision, as the water is seldom fit for human consumption. The tank requires an outlet pipe to facilitate cleaning in wet weather—the catchment needs cleaning and the down pipes therefrom should be disconnected from the tank when the first rains take place, so as to let the first rains clean the roof. Perhaps an epidemic is necessary in order to have some change effected.

ST. ANN'S BAY.

Dr. Joslen states that:

Health conditions in his district have been good. No prevalence of any particular disease—during hot months liver and stomach troubles prevail and in wet seasons rheumatism, while in cold weather so-called Vomiting Sickness occurs—this year not so prevalent but the cases have been of greater severity.

St. Ann's Bay sanitary condition has improved. Concrete drains are being laid along the sides of the streets.

The two concrete drains from the main street to the sea have improved sanitary conditions; another drain has recently been made to drain some swampy land, but as the level is low it cannot sufficiently drain the land which should be raised to prevent its being a source of danger. At present an attempt is being made to dump refuse on it; this will lead to the breeding of flies. There has been more activity in removing trees and bush and clearing yards during the past year.

As phthisis is so prevalent, the dust nuisance should be taken in hand by every local Board and sprinkling should in some manner be carried out.

The underground drain at the corner of Church and King Streets is said to emit bad smells; this drain should be properly and systematically cleaned and flushed.

ULSTER SPRING, TRELAWNY.

Dr. Smith states that:

General health has been on the whole good. An outbreak of 11 cases of enteric in May, 1910, with 3 deaths in the Rockspring District chiefly. One case occurred at the police station, Ulster Spring.

So called vomiting sickness was practically absent; due perhaps to the fact that the weather was damp rather than cold, and the sharp variations of temperature which usually precede the outbreak were absent.

Rainfall has been exceptionally heavy.

Gonorrhœa and its sequelæ are very prevalent.

Infant population is well protected against small-pox.

DUNCANS.

Dr. Purchas states that:

The first three quarters of the year were healthy, but the fourth quarter had the usual outbreak of vomiting sickness of a severe type, more "adults" being attacked than in former years. This disease appears to be invading a better class of people than is usual and proved fatal in many cases that cannot be included in the destitute class—about 26 deaths took place. Whooping cough was generally prevalent, also gastric intestinal complaints; chicken pox in Duan Vale.

Malarial fevers, in spite of the heavy rains in December, when 20 inches fell in 3 weeks were not much noticed, in fact there has been a decline during the last few years.

Yaws is not so prevalent as a few years ago, nor are the cases so loathsome; if the present treatment is continued and the education of the people continued in sanitary matters, a marked decrease, if not a total disappearance of the disease should take place.

Duncans, chief town of the district, is very insanitary ; bushing and cleaning is little done, but education will improve it.

Vaccination has been done regularly and without difficulty.

FALMOUTH.

Dr. Myers states that :

The rainfall in November and December was very heavy ; many cases of malaria were treated, chiefly of the billious remittent type.

Many cases of vomiting sickness were reported, mostly seen by Captain Potter, R.A.M.C.

Whooping cough has been and is epidemic.

The sanitary condition of Falmouth is on the whole satisfactory. Settlements of water take place after rainfall, but concrete drains are being laid down, and the lie of the land is so low that drainage is difficult. Crabholes are numerous in and around the town, and would be the better of filling ; the lakes on the west side of the town afford in parts an excellent breeding place for mosquitoes, as do also the vegetation covered crabholes which surround them. These matters have been engaging the attention of the Parochial Board.

The strong sea breezes are largely responsible for the sanitary condition of the town.

Two cases of enteric were seen ; in one case the infection was probably brought from without the district.

ADELPHI.

Dr. Johnston states as follows :—

There is urgent need for education of mothers in regard to the feeding and care of their infants, seeing that there are so many cases of malnutrition and sickness due to improper feeding.

There was the usual outbreak of Vomiting Sickness from mid-January, to mid-March while an epidemic of Whooping Cough took place in February and March.

There is much malaria in the district, chiefly tertian and, to a less extent, sub-tertian in type ; many cases presenting marked anæmia.

Venereal diseases are very common ; ignorance, along with the characteristic indisposition to take the trouble to obtain a cure for what is in many cases regarded as a sign of adolescence, causing the general neglect of this disease unless painful complications ensue.

Regarding paupers the prevalent diseases are Syphilis, Sequelae and complications of Gonorrhœa, also chronic Ulcer.

That he had recently found Ankylostoma ova in two cases of severe anæmia in coloured people and he is trying to induce these people suffering from characteristic systems to bring him dejecta for examination.

Dr. Johnston records a protest against the increasing importation of sale of "Patent Pills," the common use of which by the peasantry is harmful—and states that if the importation of these pills were to be stopped the dispensers could supply the local demands with remedies combined according to well known formulæ and conforming to British Pharmacopœia standards of purity. Vaccination is being regularly carried out.

MORTEGO BAY.

Dr. Thomson states that :

There was an epidemic of German Measles and Whooping Cough, mostly of a mild type during the end of the year.

Following the heavy rains malaria was more prevalent than usual, two or three cases being hæmoglobinuric.

Enteric Fever of a mild type appeared, especially at Cambridge, due evidently to contaminated water supply.

Montego Bay is fairly sanitary, but mosquitoes and flies are still much too numerous.

Several hundred cases of Yaws have been treated, the majority improving by treatment.

Syphilis is very prevalent and should have much more attention paid it than Yaws. More than 60% of the Poor House inmates and those seeking Poor Relief suffer from Syphilis or some other Venereal disease. I am probably underestimating it. This would be a proper subject for legislation.

Several cases of so-called Vomiting Sickness occurred. All proved fatal.

Children are fairly well protected from small-pox—the protection among adults is practically nil, more than 90% have never been re-vaccinated since infancy.

LUCEA, (HANOVER.)

Dr. Frank Cooke states :

Sanitary conditions in Lucea are fairly satisfactory. No Health Officer has been appointed ; the sanitary work is in the hands of the Clerk to the Parochial Board. There are many spots that ought to be cleared of trees.

The water supply is imperfect as there is not sufficient water in the dry weather for all needs, consequently wells have to be used, the risk of Typhoid infection being increased. There are doubtless many such cases. Until the water supply is increased there will always be this danger.

There were 10 cases of Enteric Fever admitted to hospital, with 2 deaths.

Syphilis is increasing—primary stage never seen, secondary rarely unless the throat is affected.

593 cases of Yaws seen—district constables energetic, many cures.

Malaria chiefly notable round Green Island, 27 cases admitted to hospital. Swamps below sea level plentiful. Should be bushed and left for sun to play on.

Bad feeding causes high infantile mortality.

LITTLE LONDON, (WESTMORELAND.)

Dr. Sinclair reports that:—

Malarial fever has not been quite as prevalent as usual. Sanitary conditions remain much as before, and he does not see any attempt so far made by the authorities to enforce the provisions of the Health Law or much chance of anything being done if the sanitary affairs of the Parish are left to the Parochial Board.

He in no way casts any reflection on the Parochial Board but he thinks that with the limited amount of time that the Board can devote to public affairs, the limited means at their disposal and the absolutely unskilled men they would have to employ for the important work of sanitation it is imposing on them a task, from the very nature of the circumstances, that they cannot perform with any degree of satisfaction to themselves or to the public.

That there are no adequate means of carrying out the Health Law and that until there is a properly constituted Health Department, no great improvement can be expected and no progress whatever made with the much-talked of Sanitation.

Some improvements in Yaws have taken place, but only hopes for its complete eradication by means of segregation. Still he thinks that the present systematic treatment is doing good and that it educates the people on the subject of its contagiousness, although they are very careless.

Venereal Disease does not seem to be so prevalent.

The rainfall has been normal and food has been abundant and the products of the peasants' provision grounds give them 9-10ths of their food, yams, cocoes, sweet potatoes, pumpkins, plantains, bananas and breadfruit being their chief daily diet, with a little salted fish or pork.

It seems to him that in spite of one's preconceived ideas regarding the nutritiousness of roots such as the yam, one commonly sees a gang of fine well-developed men working with a cutlass from 7 a.m. to 6 p.m. with one hour for breakfast while their diet day after day consists of the above. On Saturday some of them may get a bit of beef.

The children are well protected against small-pox but that if an outbreak were to take place among adults what a terrible calamity it would be. To omit vaccinating adults seems as unwarrantable as it would be to disband the army because there had been no war for some time. Prevention is better than cure.

LAMB'S RIVER.

Dr. Stafford reports that:—

Malaria have been more prevalent and more severe than for several years.

Typhoid fever has been of frequent occurrence, scattered in different parts of the district. There has been many cases of Rheumatism.

Whooping Cough has been epidemic with some deaths while Influenza has also been prevalent.

No cases of Vomiting Sickness have appeared and the gratuitous distribution of Santonin has proved a useful prophylactic. Illness is more prevalent in dry seasons.

Water is obtained chiefly from ponds in the higher districts which ponds during dry seasons become offensive and breeding places for mosquitoes. Some of them are too near dwellings and if possible their removal as centres of disease should be accomplished.

Yaws is more under control; by systematic treatment and education the disease can be kept within very narrow bounds if not entirely suppressed.

The protection against Small-pox among the younger people is satisfactory, but some older persons seem to have eluded the vaccination provisions, only availing themselves of this privilege when they contemplate or are on the point of going abroad to States where they know Vaccination is compulsory.

SAVANNA-LA-MAR.

Dr. Harvey states that:

Malarial Fever was prevalent between July and December but that the death rate was trivial; it was prevalent during and particularly towards the end of the wet season. The latter part of the year was dry, with a corresponding decrease in the number of such cases.

There was some influenza late in the year.

Some improvements have been made in sanitation in the town, some concrete drains have been laid down in the lanes of the town looking west and I understand that kerosene oil is regularly added to various fresh water pools in the vicinity of the town.

Rainfall was about the average.

A large number of cases of Bronchial, Nasal and Frontal Sinus irritation, due to dust inhalation were seen and it was curious to note how rapidly the number of such cases diminished when the first showers of rain arrived.

No disease assumed a serious epidemic form.

GRANGE HILL.

Dr. Campbell states that :

There are no attempts at Sanitation at Grange Hill ; a proper water supply is needed. From January to April the people had to dig in the sand of a neighbouring gully for water with all sorts of utensils owing to the wells being dry—the wells, needless to say, are shallow wells and he is told that graves in some cases are quite close to a well. Something should be done to remedy this. During the latter months of the year Malaria was very prevalent, also Pleurisy Pneumonia and Rheumatism.

Gastric troubles were present and Syphilis has full swing among the poorest classes.

There are many ponds and collections of water in the district with houses in close vicinity, also much bush, consequently every opportunity for the mosquito to ply his trade.

Yaws has been treated in the usual way, some of the cases treated up to January have had relapses.

Some people with difficulty bring out their children for vaccination.

BALACLAVA, ST. ELIZABETH.

Dr. Lofthouse reports that :

A widespread epidemic of Whooping Cough took place, but that few people troubled about treatment, consequently many deaths are said to have occurred, preventable deaths probably due to Broncho-Pneumonia. There were many cases of acute lung trouble among infants during the wet season, very likely due to the small children being allowed to sit and lie about the wet yards at their own will and pleasure. There were many cases of Venereal disease but only four primary cases seen.

BLACK RIVER.

Dr. C. H. Farquharson reports as follows :—

No particular form of illness has been present.

Malaria occurs chiefly during the rainy seasons and is usually of a mild type. The sanitary condition of the town is fair but could be considerably improved.

Ulcers are always in evidence throughout the year.

Protection against Small-pox is bad, there being no re-vaccination.

Several cases Enteric treated in hospital ; only those which arrived in hospital having been previously neglected and in a hopeless condition succumbed. Many cases of Yaws treated with success in hilly districts. Difficult to get patients to follow up treatment or to meet him at centres for inspection. Many cases of Syphilis were treated in Hospital.

SANTA CRUZ.

Dr. Calder states that :

The district as a whole has maintained its high standard of healthiness. When malaria occurred it took place during and after the rainy weather.

Several cases of Typhoid were treated in the Pedro District. On visiting he explained to the people the nature, cause, precautions to be observed and treatment, and the disease was stamped out.

Varicella of a severe type, whooping cough (the latter causing some deaths) were present. The sanitary condition of Santa Cruz is that of unassisted nature.

He is of opinion that the Government should subsidise at least one Dentist in every parish—the primary cause of ill-health is in cases seen day by day imperfect mastication and the peasantry can neither obtain nor pay for dental assistance. A subsidised Dentist could be obtained on the lines adopted for medical treatment by means of the Ticket system.

NEWPORT (MANCHESTER.)

Dr. Meikle, reports that cases of Vomiting Sickness occurred in the districts of Asia, Green Town and Harmons during the months of January and February, 1911, with as far as can be judged 22 deaths, adults being attacked the sickness not being confined to the very poor.

During October 1910 several cases of Enteric occurred of a mild type. The districts have been systematically searched for cases of Yaws and it is believed that all such persons are now under treatment.

MANDEVILLE.

Dr. Cooke reports that :

Enteric Fever occurred in September, October and November within a radius of 4 miles from Mandeville, most were severe cases and mortality high in consequence of the disinclination of the peasantry to report cases until they are in a hopeless condition. This may have been due to the desire to avoid the visits of the Health Officer and Inspector of Nuisances who insisted on cleaning up and lime washing.

There were very few cases of infective disease within a radius of half a mile of Mandeville Court House, due probably to the general scavenging and removal of bush and filth that has taken place. There is room for improvement in sanitary matters however, such as the more frequent cleaning of livery stables and yards, the removal of the public stables, better supervision over the market latrines, which at present are in a deplorable condition, the accommodation being insufficient and only one latrine for males and females alike, consequently the surrounding area is saturated with urine and faecal matter and it is not pleasant to think of the proximity of this area to the market where flies are at times so numerous. Another latrine is kept locked for the lessee of the market.

These latrines should be removed altogether.

A very good water supply has been installed, the water being collected in a reservoir about two miles from Mandeville—the Hotels are laying it on. The younger community is well protected, but re-vaccination would be difficult to enforce in the absence of a scare.

CHRISTIANA.

Dr. Halliday states that:

German Meales, Whooping Cough, Chicken Pox and Meales were epidemic, such diseases being more prevalent than usual.

There were seventeen cases of Enteric Fever. Syphilis is very prevalent.

Rainy and damp weather was prevalent and several cases of sub-acute rheumatism resulted—Whooping Cough interfered with vaccination.

CROFTS HILL, (CLARENDON.)

Dr. Cassidy reports that:—

This is a comparatively healthy district, most of the people living at high altitudes—malaria is not of frequent occurrence, those cases seen being in the valleys or having come from outside. The district of Roden Hall is an exception however being situated on a plateau which has numerous springs with stagnant back waters, in some of which Anopheline larvæ have been found and several cases of fever occurred in March.

Whooping cough has been epidemic.

Sporadic cases of so called Vomiting Sickness occurred in January and February. Two post mortems revealed numbers of round worms.

Doubtless worms cause a good many deaths in early childhood causing severe and fatal Enteritis.

Cases of Multiple Neuritis, chronic in type, are not infrequently seen and they are due to malaria.

Syphilis is prevalent but unfortunately few cases are seen until the tertiary stage has been reached. It is only when infection is of exceptional virulence that they are seen in an early stage, but the long course of treatment which is necessary is beyond the means of the average peasant. Gastro-Intestinal diseases form the majority of the cases seen.

CHAPELTON.

Dr. A. W. Thomson states that:—

Vomiting Sickness was curiously not epidemic as usual—only a few sporadic cases occurred.

Whooping Cough and Chicken Pox were epidemic.

A number of cases of Enteric were seen and year by year the increasing area infected is very noticeable. Cases occurred in Chapelton and neighbourhood.

LIONEL TOWN.

Dr. Tillman states that :

Malaria fever was as usual present after rainy seasons, type mild, as rain was neither heavy nor continuous ; many cases of neuritis occurred. Rheumatism was prevalent but mild. Diarrhoea and dysentery were very marked ; 218 cases, 6 deaths. Several cases of ankylostoma came under notice, but patients object much to the drastic treatment. The Alley is far from being in a sanitary condition. If appointed Health Officer hopes to be able to improve health conditions. Wesley is far worse, in $\frac{1}{2}$ of a square mile 170 houses packed with 835 inhabitants ; district low lying ; main road acts as a common sewerage for the scourings of the yards ; no elementary sanitary precautions taken ; wants Parochial Board to proclaim it a township so that it may come under the new Health Law, so as to try and see if something can be done to lessen such a menace to health and to the hospital.

He is of opinion that 4 marks at the time of infants vaccination practically protect for life, while of those who were vaccinated with 3 marks 25% require re-vaccination, and those with two marks 50% require re-vaccination. Opines that all adults having been vaccinated with less than 4 marks should be re-vaccinated.

MAY PEN.

Dr. Earle reports that :

Considerable improvement has taken place during the year in the sanitary condition of the town. Tanks have been emptied, stagnant ponds have been drained, a concrete gutter now leads all the contents of the public latrine by the court house down the side of the hill and a gutter leads all the refuse from the Almshouse across the main road and deposits it in a gully down to the bed of the river.

Improvement has taken place in several of the compounds and yards, a large concrete culvert has been built down the main road at the standpipe on the Four Paths road. Several matters still require attention. Covering of tank at the almshouse. Protection of meat stalls at the market from the crows. Prevention of water taps being allowed to run, forming stagnant pools. Penguin growing in yards should be cut down. Depositing of banana trash over certain plots should be discontinued. Pigs should not be allowed to be kept in yards. The sweeping of streets is not properly done. The dust nuisance should be abated. The cleaning of yards and compounds should be zealously continued and not allowed to be neglected.

Health conditions presented no unusual feature during the year ; 3 cases of typhoid fever occurred ; their origin was obscure, contagion was probably due to flies. Some other cases

occurred in the district, treated by a private practitioner. The year was very dry, except during October, when very heavy rains occurred. Malarial fever was prevalent after the heavy rains. No cases of vomiting sickness seen. A few cases of chicken pox. Whooping cough was prevalent. Venereal diseases of all kinds are common; medical aid is seldom sought until the disease has sapped the health and vitality of the patient. Vaccination was regularly performed; the younger members of the population are fairly protected against small-pox.

OLD HARBOUR, ST. CATHERINE.

Dr. Simpson states that:

The rainfall during the year reached 43.5 inches, and comparatively little sickness was present; that the concrete gutter on the Spanish Town road has been extended from a point opposite the Post Office to another in front of Ludford School, and the concrete drain leading from the clock in the Old Harbour direction has been considerably lengthened.

There has been continued treatment for yaws, of which there is a great deal in the district. Vaccination has been carried out extensively.

SPANISH TOWN.

Dr. Peck states that:—

There have been malarial outbreaks in several parts of the district but nothing for special comment except in places where from defective irrigation stagnant pools remain such as the Port Henderson district.

Five cases of Typhoid Fever were observed, the infection in one case was from Kingston.

An epidemic of whooping cough took place.

Infantile diseases were prevalent due to want of proper care, bad feeding and defective hygienic surroundings which cause accounts for the mortality.

Yaws are in some cases difficult to treat owing to the want of water in certain districts, Kitson Town and Highgate for example. The Parochial Board should provide proper tanks in these districts.

LINSTEAD.

Dr. Clark states that:

Whooping cough has been epidemic.

An unusual number of Yaws cases have been seen the benefits received by treatment seems to be having a salutary effect.

There is some slight improvement in the sanitary condition of Linstead, cleaning and draining of ponds has taken place and bush cleared away—the drains in some of the streets need more frequent looking after and much waste of water still goes on, creating nuisances and making breeding pools for mosquitoes.

Vaccination was regularly done.

PORT ROYAL.

Dr. Donovan states:

No epidemic of disease during the year. Some severe cases of malaria and four among officers and men of the R.G.A., the sources of infection were said to be the harbour forts. The H.M.S. "Brilliant" landed at Port Royal 30 cases malarial fever, which was contracted at Honduras. Some of the cases were very acute but no mortality occurred.

No breeding place of the malarial mosquito could be discovered in the town and its vicinity—there is much to be desired in the way of sanitary improvement in the habits of the inhabitants.

The following report by Dr. Moseley, D.M.O., Port Antonio, on the results obtained by him in the treatment of Yaws with "606" remedy is submitted:

The Hon. S.M.O.,
Sir,

I have recently treated four cases of Yaws in this hospital with "606" with such excellent results, that I deem it right to send you a short report on the cases, in the hope that you will take steps to provide the hospitals with the drug, for the treatment of Yaws as well as Syphilis.

Dr. Hugh Cabot of Boston (U.S.A.) very kindly sent me six doses by Dr. Whittamore who came here to see the late Mr. Mitchell, with the request that I would use the drug in the treatment of Yaws. In writing me Dr. Cabot referred to the excellent results obtained by the American Surgeons, in treating Yaws in the Phillippines with "Salvarsan."

Case No. 1. A man of about 20 with a sloughing ulcer about four inches in diameter on the dorsum of the right foot near the toes, together with the honey-combed condition of the sole of either foot so characteristic of Yaws, had an injection of "606" on May last. Dr. Whittamore was good enough to prepare and administer this dose—no other treatment has been employed except some anti-septic lotion to the ulcer. The ulcer has healed, the unhealthy skin has separated from the soles of the feet, and the man's general condition has greatly improved.

Under the usual treatment this man's stay in hospital would probably have extended over three months, with the chances of a recurrence before he had been out of the hospital a week. The cicatrix looks so sound and the man's condition is so very much improved that I think a recurrence is out of the question.

Case No. 2. A woman of 26 with extensive ulceration of the right leg, extending from the knee to the ankle, and involving almost the entire circumference of the limb, of, so she stated, several years standing. This woman under ordinary circumstances would not have been admitted, as her case would not have been regarded as a suitable one for hospital treatment. A dose of 6 grammes was given on the 18th May. No other treatment has been employed, except lotions to keep down the extremely offensive smell that was present on admission. The woman is practically well, one or two points only remaining to heal.

Case No. 3. A young woman of 17, who was admitted on the 30th November last, with an ulcer over the lower end of the left fibula. She had been an inmate of the hospital on two former occasions, suffering from ulcers the result of Yaws. She has a large cicatrix on her forehead, another at the back of the neck in addition to several others on her limbs, etc. The lower end of the fibula became involved, and as improvement did not follow repeated scrapings it was ultimately removed. Improvement followed this, but whenever she walked the foot became painful and swollen, so that she had to be returned to bed. On the 3rd inst. a dose of 6 grammes was divided between the patient and the case following, the improvement was marvellous, the pain left the foot, and her whole appearances were altered, she left the hospital yesterday in apparently robust health. All other medication was stopped on giving the "606."

Case No. 4. A child of fourteen, a girl, with punched out ulcers extending from a little below the left knee to within a few inches of the ankle, of apparently many months standing, the ulcers had run into each other at different points, forming practically one large sloughing surface. On the 3rd inst. the other half of the dose administered to case No. 3 was injected. The improvement has been marked, the sloughs have all separated, the punched out appearance has disappeared, the surface of the ulcer being now level with the surrounding skin, and in addition there is the formation of new epithelium all along the edges. No other treatment has been employed except of course the ulcer has been kept clean, anti-septic lotions at first to obviate the smell, lately boric ointment has been used as a dressing.

The drug, I find is difficult to prepare for injection. I lost the first dose in preparing it with 15 % Sodium Hydroxide solution, since, I have employed it made up in an emulsion with sterilized olive oil. A full dose is divided into two, half being injected deeply into either gluteal region. Comparatively little pain has followed the use of the emulsion.

I am keeping the remaining two doses in the hope that I may run across two acute cases of the disease. It may be considered premature to base conclusions on the treatment of four cases only, but the results have been so exceptionally good that I think a more extended trial is warranted.

I have, etc.,

(Sgd.) C. A. MOSELEY,
D.M.O.

INFANTILE DIARRHOEA.

The following are the Returns for Kingston which speak for themselves :

	Medically certified.	Non-medically certified.
1910—		
April	4	4
May	3	4
June	1	4
July	4	2
August	2	4
September	5	0
October	1	2
November	2	0
December	0	2
1911—		
January	2	2
February	2	2
March	3	2

Doubtless many of these deaths are due to injudicious feeding and it is to be hoped that some arrangements will be made for the future by which the elements of Hygiene may be taught in all the schools of this Island and the elements of infant feeding in the Girls' schools. I see that the matter is being taken up in England and a Bill is being introduced into Parliament providing for this very necessary instruction. Surely some punishment should be meted out to Mothers who do not take the trouble to obtain medical assistance for their children when sick. The Parochial Board should institute, as is now being legislated for in England, a system of Health visitors whose duty it should be to make house to house visits and enquire into the health conditions of every house and family. In this manner sick children would have a chance of being attended to early even though their parents were neglectful and careless.

INFANTILE DISEASES.

Below is a list provided by the Registrar-General month by month of deaths due to infantile diseases in Kingston during the year under review.

			Medically registered.	Non-medically registered.	Total.
1910—					
April	..	..	16	24	40
May	..	..	12	26	38
June	..	..	8	40	48
July	..	..	11	21	32
August	..	..	12	21	33
September	..	..	10	10	20
October	..	..	10	9	19
November	..	..	8	13	21
December	..	..	9	17	26
1911—					
January	..	..	18	27	45
February	..	..	11	29	40
March	..	..	20	36	56

The fact such a large number of deaths are not medically registered speaks for itself.

Having been ordered to send in my report by the end of June it is impossible to make any mention of what has happened throughout the rest of the Island owing to the Registrar General's Returns not so far having come to hand.

UNDISTINGUISHED FEVERS.

I beg to call attention to the large number of deaths due to undistinguished fevers in Kingston. The Annual Returns of the Registrar-General for the whole Island have not so far been received. Below is attached a monthly return of deaths from such fevers in Kingston.

			Medically certified.	Non-medically certified.	Total.
1910—					
April	..	..	1	6	7
May	..	..	1	4	5
June	..	..	0	8	8
July	..	..	2	3	5
August	..	..	0	5	5
September	..	..	0	2	2
October	..	..	4	3	7
November	..	..	1	3	4
December	..	..	0	6	6
1911—					
January	..	..	1	4	5
February	..	..	2	2	4
March	..	..	0	3	3

The Summary of Diseases treated and Operations performed are herewith attached.

I have the honour to be,

Sir,

Your obedient Servant,

J. E. KER,

Suptg. Medical Officer.

The Honourable,
The Colonial Secretary,
Kingston.

Summary of Diseases treated in the various Hospitals of Jamaica, exclusive of Kingston for the year 1910-1911.

General Diseases.	Cases.	Deaths
Chicken Pox	5	
Measles	7	
Whooping Cough	1	
Influenza	11	
Enteric Fever	145	52
Dysentery	136	4
Malarial Fever, Interm. ..	6,542	22
Remit.	522	32
Pernicious	21	4
Erysipelas	2	
Pyæmia	3	1
Septicæmia	16	8
Tetanus	9	4
Tubercle	101	12
Leprosy	2	1
Yaws	103	
Syphilis	157	2
Primary	186	6
Secondary	50	2
Tertiary	112	1
Congenital	17	
Gonorrhœa	242	1
Alcoholism	3	
Rheumatism	1,331	1
Rheumatic Fever	56	
New Growth, Malignant ..	78	6
Non. Malig.	96	
Anæmia	321	12
Diabetes—Mellitus	2	1
Insipidus	1	
Debility	76	8
Beri-beri	1	
Diseases of Nervous system—		
Neuritis	86	2
Meningitis	5	1
Myelitis	3	
Abscess of Brain	2	1
Congestion of Brain ..	5	2
Functional Nervous Disorders—		
Apoplexy	14	4
Paralysis	18	
Epilepsy	32	3
Neuralgia	338	
Hysteria	18	
Mental Diseases—		
Mania	1	
Dementia	3	1
Melancholia	3	
Headaches	3	
Diseases of Eye	285	
do Ear	71	
do Nose	12	
do Circulatory system ..	145	28
do Respiratory system ..	748	58
do Digestive system	1,750	66
do Lymphatic system	163	2
do Urinary system	390	42
do Generative system ..	47	
Male organs	311	4
Female Organs	332	4
do Locomotion	205	1
do Cellular tissue	437	
do Skin	3,597	9
do Pregnancy	16	
	19,395	408

General Diseases.	Cases.	Deaths.
Local Diseases—		
General injuries	161	10
Local injuries	1,706	27
Malformation	10	1
Poisons	6	
Parasites	76	
Anchylostoma Duodenale ..	22	
Taenia Solium	8	
Ascarides Lumbricoides ..	21	
Filaria-Sanguinis-Hominis ..	2	
Oxyuris Vermicularis	1	
Any other variety	13	
No disease	1,541	
	22,962	446
Total number of cases ..	22,962	
Total number of deaths ..	446	
Death rate per cent. ..	1.9	

SUMMARY OF SURGICAL RETURNS, 1910-1911.

Operations performed at the several Public General Hospitals in the Island.

Surgical Operations.	Cases.	Deaths.
Abscesses, incision of ..	524	2
Abdominal Section—		
Volvulus of Sigmoid ..	3	1
Nephropexy	1	
Laparotomy	22	5
Salpingotomy	1	
Colotomy	1	
Hysterectomy	12	1
Pan-Hysterectomy	1	1
Ovariectomy	3	
Ectopic Gestation	1	
Appendectomy	2	
Washing out Stomach	12	
Paracentesis Abdominis ..	19	
Abscess of Liver	1	1
Exploratory Puncture of Liver	1	
Aneurism—Ligature of Artery		
for	9	
Amputations—		
Foot (Symes)	12	
Leg (Thigh)	50	3
Leg	10	
Digits	73	
Toe	22	
Penis	14	
Forearm	11	2
Breast	13	1
Bladder and Urethra—		
Stricture, dilation of ..	227	
Washing out Bladder ..	197	
External Urethrotomy ..	1	
Internal Urethrotomy ..	1	
Perineal Section	26	2
Perineal Abscess	12	1
Retention of Urine	17	
Pelvic Cystotomy	3	
Extravasation of Urine ..	1	
Bones—		
Caries	4	
Necrosis	20	1
Osteotomy	2	
Periostotomy	2	1
Sequestrotomy	16	
Ununited fractures	2	
Carried forward	1,349	22

Surgical Operations.	Cases.	Deaths.	Surgical Operations.	Cases.	Deaths.
Brought forward ..	1,349	22	Brought forward	2,054	25
Laminectomy ..	1		Hypertrophy of Labia ..	1	
Eye on—			Hypertrophy Cervix ..	1	
Pterygium ..	7		Uterine hæmorrhage ..	1	
Ext. of cataract c. Iridectomy	4		Vesico vaginal fistula ..	4	
Ext. of cataract sine ..	5		Rectum and Anus—		
Extirpation of Globe ..	30		Fistula in Ano ..	8	
Plastic operation—Eyelid	1		Stricture of ..	5	
Ectropion ..	1		Hæmorrhoids ..	22	
Foreign body removed from—			Polypus Recti ..	4	
Ear ..	7		Fissure in Ano ..	1	
Foot ..	5		Artificial Anus ..	2	1
Nose ..	4		Nails, removed ..	46	
Eye ..	9		Plastic operations ..	9	
Hand ..	4		Dislocations—		
Throat ..	4		Shoulder ..	8	
Thigh ..	1		Jaw ..	1	
Vagina ..	1		Hip ..	1	
Knee ..	1		Wrist ..	1	
Face, Nose, Mouth, &c.—			Ulna ..	1	
Nasal Polypus ..	3		Incisions cellulitis and		
Ear Polypus ..	2		carbuncle ..	57	
Harelip ..	2		Trephining and cleaning		
Tonsils removed ..	31		mastoid cells ..	3	
New growth—Mouth ..	1		Trephining for comp. depressed		
Tracheotomy ..	1		fracture skull ..	1	
Joints—			Tendons—		
Arthrotomy ..	12		Suturing of wounds ..	32	
Reduction of ..	6		Tenotomy ..	5	
Ankylosis ..	1		Tumours and Cysts—		
Lymphatic Glands—Excision of	49		Carcinoma ..	9	1
Scraping and cauterising	7		Aural tumour ..	1	
Hernia—			Bursal tumour ..	3	
Reduction of ..	6		Adenoids ..	8	
Radical cure for ..	27		Cystic tumour ..	7	
Herniotomy for strang. Hernia	8	2	Fibroma ..	13	
Fractures—			Lipoma ..	12	
Simple and compound ..	149	1	Meibomian Cyst ..	1	
Male generative organs—			Sebaceous ..	10	
Paraphymosis ..	26		Keloid ..	3	
Phymosis ..	1		Ganglion ..	1	
Radical cure Hydrocele	16		Sarcoma ..	1	
Tapping Hydrocele ..	34		Osteoma ..	1	
Circumcisions ..	95		Polypus ..	1	
Chancroids, cauterising	40		Nævus ..	1	
Orchiectomy ..	4		Examination under chloroform	18	
Scrotum, slitting up ..	1		Scraping chronic ulcers ..	83	
Hæmatoma Tunica. Vag. T.	1		Extraction of teeth ..	614	
Female generative organs—			Slitting up sinus ..	32	
Curetting ..	82		Skin, grafting ulcers ..	1	
Atresia Vagina ..	1		Excision of Thrombosed vein	1	
Hysteropexy ..	3		Veins, ligaturing of ..	4	
Urethral Caruncle ..	6		Transplanting Rabbit bone into		
Cancer Uterus ..	1		Humerus ..	1	
Non-malignant new growth	1		Paracentesis Thoracis ..	7	
Paracentesis cyst broad			Tapping knee joint for		
ligament ..	1		Synovitis ..	3	
Perineorrhaphy ..	2				
Carried forward	2,054	25	Total ..	3,104	27

PUBLIC HOSPITAL.

Report for the year ended 31st March, 1911.

Island Medical Office, Kingston, 6th June, 1911.

HON. COLONIAL SECRETARY:

I have the honour to forward for His Excellency's information the Annual Report of the Public Hospital, Kingston for the year 1910-11.

A great amount of work has been accomplished by the staff of nurses.

A very regrettable feature of the service is the very large number of patients that have to be turned away for want of room—many being asked to return later on in order to obtain a bed.

In all 5,605 were for various reasons rejected as against 4,800 in the previous year.

The number of constables admitted to the hospital has been for a long time uncomfortably large—for instance a comparison is given between the first half month of the years 1905 and 1911 from which it will be seen that a great increase has taken place.

Jany. 1, 1905	11	...	1911, 25
2	11	...	26
3	12	...	28
4	12	...	28
5	14	...	31
6	14	..	32
7	15	...	28
8	15	...	27
9	15	...	29
10	14	...	29
11	12	...	31
12	12	...	28
13	12	...	29
14	13	...	27
15	14	...	27
16	14	...	29

Due to this increase in the number of constables His Excellency has allowed 10 extra beds to be added for the year 1911-12 to the 220 already provided—making 230 in all—a very welcome addition.

The number of admissions for malaria were 618 as against 855 last year but it must be remembered that there was an unusual and quite exceptional outbreak of malaria in the autumn and winter of the year 1909-10 due doubtless to the exceptional weather.

The admissions for enteric totalled 131 cases as against 137 for the previous year.

During the year the new Outpatient Rooms and dispensary were taken over from the Public Works Department and occupied.

The Rietti wards, mentioned in my last report, were also taken over in the month of July and occupied.

The Nurses Home has proved to be of much use. During the year His Excellency kindly allowed all the unpaid Probationers resident in the Home to be fed at hospital expense. The absence of free board and residence had, in the past, prevented strong healthy country girls from being trained at the hospital as they had not the means of maintaining themselves in Kingston during their probationary period at the hospital.

This is a move in the right direction and it is to be hoped that great extension of the Home will take place in the near future so that nurses may all be housed on the premises and not allowed to live all over the town.

Until accommodation is provided, however, this cannot take place.

The nosological returns are submitted in accordance with the Governor's direction.

J. E. KER,
Suptg. Medical Officer.

Public Hospital, Kingston, May 1st, 1911.

Sir,

I have the honour to place before you the Annual Report of the Medical and Surgical cases treated in the Public Hospital during the year ended 31st March, 1911.

Table 1 shows the number of patients treated in the Hospital during the period under review with results—the total being 3,376; of this number 213 remained in Hospital at the end of the year. There were 359 deaths during the year, exactly the same as the year before.

The daily average number of beds occupied was 193.

The number of applicants for admission to Hospital who were rejected for want of accommodation or for other reasons was 5,605 as compared with 4,800 in the previous year. These people are either referred to the District Medical Officer or to the Inspector of Poor or are admitted another day.

Table 2 gives the average stay in days of patients in the Hospital.

Table 3 gives the number of deaths occurring within 12, 22, 48 and 72 hours after admission. These cases were admitted in virtually a moribund condition: the total number under this heading was 117.

The death rate for the year was 10.6 as compared with 9.6 o/o in the previous year.

Table 4 gives the medical cases treated during the year with results.

The most noteworthy diseases were:—

(a) *Malarial Fever*.—The number of cases of malarial fever treated in the hospital was 618 with 15 deaths. The greatest number of admission was during and after the October rains.

(b) *Tubercle*.—Under this heading 128 cases were treated. Of this number 81 were cases of Pulmonary Phthisis and 34 cases proved fatal. The other 47 cases included Tubercular diseases of the bones, joints, glands peritoneum, etc., and 6 of these proved fatal.

(c) *Enteric Fever*. There were 131 cases of Enteric Fever treated in the Hospital, 57 of this number proved fatal. The disease was most prevalent during the months of April, May and June.

Veneral Diseases.—The subjoined table shows the number of cases treated during the year under review.

Syphilis.	Cases.	Deaths
Primary	5	—
Secondary	3	—
Tertiary	46	5
Congenital	8	3
Gonorrhoea	233	11
Chancroid	47	—

Table 5 gives the return of Surgical Operations performed with results. 1,283 operations were performed and there were 17 deaths.

Tables 6, 7, 8 give returns of countries, parishes, and occupations of patients admitted during the year.

Table 9 shows the number of prescriptions dispensed for the Outpatients, the Constabulary and the Maternity Hospital.

The number of casualties treated during the year was 7,415.

The Rietti Ward was opened on 28th July. There is accommodation for 22 patients in it, this ward has been built on the most modern plans.

Miss Whittingham the Matron took up her duties on November 26th. Miss Whittingham was trained at Guys Hospital and was ward sister for some years.

The Annual Treat to the patients was held in December.

His Excellency the Governor and Lady Olivier visited the Hospital and went through the wards.

The thanks of the staff are due to the kind friends who generously contributed to the treat, and also to those who have kindly sent books, magazines, etc., for the wards.

I have the honour to be,

Sir,

Your obedient Servant,

Sgd. CHAS. W. M. CASTLE,
Senior Medical Officer.

The S. M. O., Kingston.

TABLE I.

	Males.	Females.	Total.
Patients remaining in Hospital 31st March, 1910	121	83	204
Patients admitted during the year 1910-1911	1,649	1,523	3,172
Total patients treated	1,770	1,606	3,376
Of these were cured	1,218	1,037	2,255
" " relieved	191	161	360
" " not relieved	89	100	189
" Died	166	193	359
Remaining in Hospital 31st March, 1911	113	100	213
Total	1,777	1,599	3,376
Death Rate 10.6 %			

TABLE II.

Daily average number of beds occupied by male patients	102.5
" " " female patients	90.4
Average stay in days of those who died—males	14.2
" " " females	11.6
" " males discharged	24.3
" " females	23.8
" " males remaining at the end of the year	33.7
" " females	23.8
Longest stay of any one patient in Hospital	222 days.

TABLE III

Patients who have died within the following hours after admission,

Hours.	12	24	48	72	Total.
Males	8	19	20	12	59
Females	4	25	17	12	58
Total	12	44	37	24	117

TABLE VI—COUNTRIES.

America	7	Holland	1	Spain	2
Barbadoes	6	India	15	Switzerland	1
Cape Verde Islands	1	Ireland	2	Syria	1
China	6	Italy	2	Trinidad	2
Demerara	2	Jamaica	3078	Turks Island	2
England	9	Nassau	1	Venezuela	1
Germany	16	Newfoundland	1	Wales	1
Grand Cayman	3	Nicaragua	1		
Guiana (British)	1	Norway	6	Total	3,172
Hayti	3	Scotland	1		

TABLE VII—PARISHES.

Kingston	2,211	Trelawny	3	Hanover	1
Port Royal	15	St. James	1	Foreign Countries	94
St. Andrew	761	Westmoreland	3		
St. Thomas	10	St. Elizabeth	4		
Portland	6	Manchester	10		
St. Mary	10	Clarendon	9	Total	3,172
St. Ann	1	St. Catherine	33		

TABLE VIII—OCCUPATION.

Apprentices	43	Draymen	17	Pilots	1
Accountants	1	Electricians	1	Planters	77
Apiarist	1	Enginedrivers	1	Plumbers	4
Bakers	26	Engineers	2	Printers	2
Barbers	3	Farriers	1	Porters	2
Basketmakers	1	Firemen	24	Potters	2
Blacksmiths	8	Fishermen	16	Postmen	5
Boatmen	6	Fitters	9	Sailmakers	1
Boatswain	1	Foremen	1	Salesmen	1
Boilermakers	3	Gardeners	32	Saddlers	2
Bookbinders	1	Goldsmiths	5	Schoolmasters	9
Bookkeepers	1	Grooms	24	Seamen	22
Brakesmen	2	Hatmakers	6	Seamstresses	134
Bricklayers	26	Headmen	2	Servants	307
Busmen	12	Higglers	98	Shoemakers	19
Butchers	9	House-cleaners	26	Shopkeepers	5
Butlers	31	Jockeys	4	Shopservers	12
Cabinetmakers	3	Labourers	432	Solicitors	1
Cakesellers	8	Lamplighters	1	Speculators	1
Catechists	1	Laundresses	398	Stevedores	7
Carpenters	76	Matrons	2	Stewards	7
Cartmen	13	Machinists	2	Storekeepers	1
Cigarmakers	14	Masons	6	Storemen	13
Clerks	25	Mechanics	4	Tailors	17
Clergymen	2	Merchants	1	Tinsmiths	4
Coachmen	26	Messengers	9	Trimmers	3
Commission Canvassors	2	Milliners	1	Tobacconists	1
Conductors	3	Miners	1	Vendor (news)	3
Cooks	55	Motormen	5	Warders	6
Coopers	6	None	613	Watchmen	6
Constables	259	Nurses	54		
Dentists	1	Painters	17	Total	3,172
Dispensers	1	Peddlers	12		

TABLE IX.

No. of out-door patients with tickets from Inspector of Poor	...	661
“ prescriptions made up for the above	...	6,300
“ casualty patients treated with tickets	...	7,415
“ prescriptions for above	...	8,581
“ Minor surgical operations performed...	...	490
“ prescriptions for Constabulary	...	1,617
“ prescriptions for Victoria Jubilee Hospital	...	940

Annual Return of the total number of patients treated in the Public General Hospital, Kingston, 1910-1911.

GENERAL DISEASES.

Diseases.	Cases.	Deaths.	Diseases.	Cases.	Deaths.
Influenza	3	—	(a) Primary Syphilis	5	—
Pneumonia	31	10	(b) Secondary Syphilis	3	—
Whooping Cough	2	—	(c) Congenital Syphilis	8	3
Enteric Fever	131	57	(d) Tertiary Syphilis	46	5
Dysentery	1	—	Gonorrhœa and Sequellæ	233	11
Malarial Fever—Inter.	330	8	Chancroids	47	—
“ “ Remit.	271	12	Alcoholism	2	—
Malarial Cachexia	17	3	Rheumatism—Acute	11	1
Tetanus	5	3	“ Sub-acute	45	—
(a) General Tuberculosis	11	4	New Growth—Malignant	23	4
(b) Pulmonary Tuberculosis	81	34	“ Non-Malignant	50	7
(c) Tubercular Diseases of Bones & Joints	13	2	Anæmia	27	2
(d) “ “ of Glands	23	—	Debility	26	2
			Appendicitis	6	1
			Diabetis	1	—
			Total	1,452	169

LOCAL DISEASES.

Diseases of the Nervous System—			Diseases of Eye	65	11
(a) Brain—Apoplexy	21	12	“ Ear	2	—
(b) Spinal Cord—Myelitis	6	3	“ Nose	2	—
(c) Nerves—Neuritis	45	5	“ Circulatory System	98	30
Functional Nervous Disorders—			“ Respiratory “	65	10
Paralysis	9	1	“ Digestive “	352	50
Epilepsy	17	5	“ Lymphatic “	50	1
Neuralgia	2	—	“ Urinary “	66	27
Hysteria	15	1	“ Generative Organs—		
Mental Diseases—			Male	30	9
Mania	4	1	Female	133	—
Dementia	4	2	“ Cellular Tissue	122	1
Melancholia	2	—	“ Skin	90	4
			“ Bones and Joints	48	1
			“ Locomotion	2	—
			Total	1,250	174

Diseases.	Cases.	Death.
Local Injuries	200	10
Poisons	3	—
Parasites	5	1
Other Diseases	1	—
No Disease	43	—
Total	252	11

Annual Return of the Total number of Patients operated on in the Public General Hospital, Kingston, 1910-11. :—

Diseases.	Cases.	Deaths.	Diseases.	Cases	Deaths.
Abscesses—incision of	92	1	Tumours and Cysts—		
scraping of	1	—	Tumours—		
Abdomen—			Angioma	1	—
Abscess Liver, incision of	2	—	Adenoma	3	—
Fæcal Fistula, repairing of	1	1	Cystic	3	—
Laparotomy for—			Carcinoma	2	—
Appendectomy	1	—	Carcinoma, recument of breast	1	—
Appendical Abscess	1	—	Rudeal Ulcer, excision of	1	—
Exploration	4	—	Bursal	1	—
Gastrojejunostomy	1	1	Fibroma	2	—
Omental Cyst	1	—	Epulis	1	—
Ovariectomy	1	—	Keloid	1	—
Fibromyoma Uteri	2	2	Lipoma	4	—
Tubercular Peritonitis	1	—	Papilloma	2	—
Volvulus	1	—	Sarcoma	1	1
Hysterectomy	2	—	Cysts—		
Amputations—			Dermoid	1	—
Foot (Symes)	2	—	Sebaceous	3	—
Leg			Female Generative Organs—		
Digits	17	—	Curretting	67	—
Penis	3	—	Pelvic Haematoma	4	—
Toe	6	—	Polypus Uteri, removal of	3	—
Breast	8	—	Vesico-vag. Fistula, repair of	1	—
Bladder and Urethra—			Recto-vag. Fistula, repair of	2	—
Stricture, dilation of	19	2	Carcinoma Uterus, scraping of	1	—
Perineal Section	17	6	Cervix Uteri, amputation of	2	—
Urethral Caruncle, cauterising	5	—	Perineam, repair of	1	—
Bones—			Trachelorrhaphy	2	—
Osteotomy	1	—	Submucous Fibroid, enucleation of	2	—
Winning Patella	1	—	Male Generative Organs—		
Sequestrotomy	8	—	Circumcision	61	—

Diseases.	Cases.	Deaths.	Diseases.	Cases.	Deaths.
Eye—			Hydrocele, radical cure for	5	—
Enucleation of	14	—	Orchiectomy	2	—
Ext. of Cataract c Iridectomy	2	—	Chancroid, cauterising of	4	—
Ext. of Cataract sine Iridectomy	6	—	Varicocele	2	—
Ext. of Dislocated Lens	1	—	Penis, slitting up	2	—
Iridectomy	3	—	plastic operation	1	—
Meibromian Cyst, incising	2	—	Paraphymosis, reduction of	1	—
Pterygium	4	—	Hernia—		
Needling Cataract	6	—	Radical cure for	23	—
Rectum and Anus—			Herriotomy for strangulated	3	1
Hæmorrhoids—			Herniotomy for incarcerated	1	—
Ligaturing of	13	—	Glands—		
Cauterising of	3	—	Excision of	74	—
Fistula in Ano, slitting up	5	—	Scraping of	24	—
Perineal Fistula, slitting up	7	—	Joints—		
Polypus Recti, removal of	1	—	Breaking down adhesions of	2	—
Stricture, dilation of	8	—	Excision of Knee-joint	1	—
Incisions—			Foreign body removed from—		
Cellulitis	2	—	Ear	3	—
Carbuncle	3	—	Foot	1	—
Haematoma	2	—	Side	1	—
Face, Mouth, Nose, etc.—			Examination under Chloroform	16	—
Nasal, Polypi	1	—	Aneurysm Sae, evacuation of	1	—
Tonsils, removal of	15	—	Gumma, seraping of	1	—
Adenoids, removal of	24	—	Nails, removal of	10	—
Antrum, exploration of	1	—	Suture, removal of	1	—
Teeth, extraction of	3	—	Sinuses, opening and scraping	12	—
Tongue, Incision of part	1	—	Tendons, suturing of	2	—
Lip, plastic operation	1	—	Tenotomy	1	—
Polypoid Growth	1	—	Wounds, suturing of	3	—
			Total	704	17

MINOR SURGICAL RETURNS.

Operations.	Cases.	Deaths.	Operations.	Cases.	Deaths.
Abscesses—incision of	148	—	Curetting	2	—
Amputation—			Male Generative Organs—		
Digit	1	—	Circumcision	3	—
Bladder and Urethra—			Hydrocele—tapping	17	—
Stricture—dilation of	56	—	Paraply mosis—red. of	2	—
Retention of Urine	15	—	Glands—		
Bones—			Incision	1	—
Necrosis	1	—	Scraping	1	—
Rectum & Arms—			Foreign body removed from—		
Recto-rag. fistulae—repair of	2	—	Shoulder	1	—
Perineal Fistulae—slitting up	1	—	Ear	11	—
Stricture—dilation of	1	—	Eye	28	—
Hæmorrhoids—ligaturing	1	—	Hand	7	—
Haematoma—incision of	2	—	Foot	5	—
Face, Mouth, Nose, etc.—			Throat	7	—
Tonsils—removal of	46	—	Finger	13	—
Nasal Polypi—removal of	2	—	Nose	11	—
Teeth—extraction of	16	—	Thigh	1	—
Tumours & Cysts—			Nails—removal of	3	—
Tumours—			Ulcers—scraping	2	—
Cystic	1	—	Fractures—setting up	62	—
Papilloma	3	—	Dislocations	11	—
Cysts—					
Garglion	3	—			
Ranula	1	—			
Sabaceous	2	—			
			Total	490	—

Financial Return of the Public Hospital for the five years ending 31st March, 1907, 1908, 1909, 1910, 1911.

Parish.	Average daily number of Beds.	Gross Expenditure.	Receipts.	Net Expenditure after deducting receipts.	Number of patients admitted.	Average annual cost per bed calculated on the gross expenditure.	Average daily cost per bed calculated on the gross expenditure.	Average annual cost per bed calculated on the net expenditure.	Average daily cost per bed calculated on the net expenditure.	Cost of maintenance alone per bed per diem.
		£ s. d.	£ s. d.	£ s. d.		£ s. d.	£ s. d.	£ s. d.	£ s. d.	s. d.
1906-7	229	9,192 8 9	412 4 8	8,780 4 1	4,349	40 2 10	0 2 2½	38 6 9½	0 2 1	0 8
1907-8	194	8,850 15 8	456 8 11	8,393 16 9	3,544	45 12 5	0 2 6	43 5 4	0 2 4½	0 10½
1908-9	188	8,203 10 7	394 3 11	7,809 6 8	3,529	43 12 8	0 2 4½	41 10 9	0 2 3½	0 10½
1909-10	189	8,094 8 6	344 5 7	7,750 2 11	3,498	42 16 6	0 2 7½	41 0 1½	0 2 2½	0 10½
1910-11	193	9,016 14 10	337 9 11	8,679 4 11	3,172	46 14 4½	0 2 6½	44 19 4½	0 2 5½	0 10½

Total cost of Maintenance £3,134 16 7d.

VICTORIA JUBILEE LYING-IN HOSPITAL.

Report for the year ended 31st March, 1911.

31st March, 1911.

SIR,

I have the honour to submit the report of the Victoria Jubilee Lying-in Hospital for the year ended 31st March, 1911.

The number of patients admitted during the year was 600, against 650 of the previous year. There were no refusals during the year: all the patients who applied were admitted. 382 of the patients were black, 212 coloured, 3 coolies, 3 white, 160 were married.

533 resided in Kingston, 56 St. Andrew, 11 were in more remote parishes.

There were five deaths during the year, one each from Pulmonary Embolism, Septicaemia, Puerperal Convulsions, Albuminuria, Uterine Myoma.

The number of infants born was 604 of these 288 were males, 316 females. There were fifteen cases of twins, 60 of the infants were still born.

Eight pupil nurses were admitted for training. One resigned as she found the work did not suit her. Seven passed and had certificates given to them.

I have the honour to be,

Sir,

Your obedient Servant,

(Signed) M. GRABHAM,

Visiting Medical Officer, Victoria Jubilee Hospital.

The Suptg. Medical Officer, Kingston.

SYNOPSIS OF CASES.

<i>Presentations—</i>			Puerperal mania	...	1
Vertex	...	557	Pulmonary embolism	...	1
Unreduced occipito posterior	...	4	Rheumatism	...	1
Footling	...	21	Rigid os	...	4
Transverse	...	1	Syphilis, tertiary	...	2
Face	...	1	<i>Diseases or deformities affecting the infant or foetal membranes—</i>		
<i>Diseases and complications affecting the mother—</i>			Ascites	...	2
Abortion	...	1	Anencephalous monster	...	1
Abscess of breast	...	1	Born with teeth	...	1
Adherent placenta	...	1	Convulsions	...	1
Albuminaria	...	12	Deformed hands	...	1
Anaemia (? ankylostomiasis)	...	1	Extra fingers	...	2
Convulsions, puerperal	...	9	Haemorrhagic diathesis	...	2
Dysentery	...	4	Imperforate anus	...	2
Fibroids	...	2	Ophthalmia	...	6
Fever, paratyphoid	...	3	Spina bifida	...	1
Fever, malarial	...	5	<i>Operations—</i>		
Haemorrhage, post partum	...	1	Versiom	...	21
Hypertrophy of cervix	...	1	Application of forceps	...	10
Inertia, uterine	...	14	Curetting	...	1
Neuritis	...	3	Craniotomy	...	2
Phthisis	...	2	For ruptured perinaeum	...	26
Placenta praevia	...	2			

Numerical Summary of results since the opening of the Institution.

Year.		No. of Patients.	Race.				Infants.				Deaths.	No. of Nurses trained.
			Black.	Coloured.	Coolies.	White.	Male.	Female.	Twins.	Still-born.		
1892-93	...	89	67	22	—	—	20	34	—	14	4	4
1893-94	...	219	171	44	3	1	74	85	1	35	9	11
1894-95	...	239	185	48	2	4	76	96	6	27	3	6
1895-96	...	217	187	26	1	3	89	86	3	40	1	5
1896-97	...	378	281	92	4	1	173	189	6	39	7	8
1897-98	..	444	319	120	3	2	229	210	12	37	10	6
1898-99	...	500	345	146	4	5	249	253	13	60	7	10
1899-1900	...	581	382	196	2	1	277	283	11	66	9	9
1900-1901	...	483	339	135	5	4	241	227	6	38	9	9
1901-1902	...	785	589	235	7	4	379	374	10	58	7	8
1902-1903	...	651	429	219	2	1	332	325	19	51	11	12
1903-1904	...	813	596	205	3	9	394	405	21	78	11	9
1904-1905	...	655	475	174	2	4	339	307	20	62	8	11
1905-1906	...	415	248	156	4	7	198	214	8	36	10	9
1906-1907	...	441	352	79	3	7	221	215	15	29	11	6
1907-1908	...	434	270	161	3	—	243	155	14	40	7	8
1908-1909	...	596	400	188	3	5	300	268	7	49	10	6
1909-1910	...	650	380	265	4	1	330	319	10	53	9	7
1910-1911	...	600	382	212	3	3	288	316	15	60	5	7

Financial Return of the Victoria Jubilee Lying-in Hospital for the five years ended 31st March, 1905, 1906, 1907, 1908, 1909, 1910.

Year.	Average daily No. of beds occupied.	Gross Expenditure.	Receipts.	Net expenditure after deducting Receipts.	No. of patients admitted.	Average annual cost per occupied bed calculated on the gross expenditure.	Cost of maintenance alone per occupied bed per diem.	Daily cost per occupied bed calculated on the gross expenditure.	Average annual cost per occupied bed calculated on the net expenditure.	Average daily cost per occupied bed calculated on the net expenditure.
		£ s. d.	£ s. d.	£ s. d.		£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1905-06	13	1,189 6 4	249 8 3	939 18 1	415	91 9 8½	0 1 7¾	0 5 0	72 6 0	0 3 11½
1906-07	14	1,075 3 3	278 5 3	796 18 3	441	76 15 11¼	0 1 3¼	0 4 2¼	56 18 5½	0 3 1¼
1907-08	13	1,199 3 0	264 4 9	934 18 6	434	92 4 10½	0 1 8	0 5 0½	71 18 4	0 3 11¼
1908-09	17	1,263 13 4	301 10 0	962 3 4	596	74 6 8	0 1 6	0 4 0¾	56 11 11½	0 3 1¼
1909-10	19	1,256 2 5	361 1 9	895 0 8	650	66 2 8	0 1 4½	0 3 7¼	47 2 1	0 2 6¾
1910-11	17	1,300 3 0	321 1 9	979 1 3	600	76 9 7	0 1 6¾	0 4 2¼	57 11 10	0 3 1¾

LUNATIC ASYLUM.

Report for the year ended 31st March, 1911.

Hon. Supt. Medical Officer,

Sir,

I have the honour to submit the annual report of the Jamaica Lunatic Asylum for the twelve months ending 31st March, 1911, with the usual statistical tables.

On the 31st March, 1910, there were 1,081 patients in the Asylum, and on the corresponding date of this year there were 1,169, or an increase of 88 in the twelve months, due partly to the increased number of admissions, and partly due to the decrease in the death rate, the average number resident increasing from 1,081 to 1,137, and the total number under treatment to 1,409.

During the year 324 were admitted, 164 males and 160 females, of whom 281 were first admissions; hitherto the highest number of admissions in one year was in 1907-08, when 279 were admitted.

Several harmless dements from the almshouse were refused admission, and certifying these insane for the sole purpose of transferring them to the Asylum is to be deprecated.

Provision should also be made elsewhere for another class of insane admitted, I refer to the criminal lunatics, of whom we have too many in our wards, and their presence has a demoralizing effect on those in contact with them.

I would urge that provision be made for the detention of these criminals at the District Prison, Spanish Town, where they could be properly immured. Here there is no proper accommodation for this class of inmates, and unless they are constantly confined to the railcourt measuring 12 ft. by 7 ft., they are a constant source of irritation in the wards by attempting to escape or conspiring to injure those in charge of them.

There were 71 men and 72 women discharged recovered during the year, a total of 143, shewing a recovery rate of 44.14 per cent., calculated on the number of admissions. One was discharged relieved and another not improved; 3 men escaped, two of whom were captured.

Forty-nine men and forty-two women died, a total of ninety-one, giving the low death rate of 8.03 per cent. calculated on the average number resident; twice only in the history of this institution has the death rate been lower, and it is a pleasure to record not a single death was caused by malarial fever, this can, I believe, be attributed to the 5 grain doses of quinine given all the inmates thrice weekly during and after the rainy seasons, and to the steps taken by the Government to clear the surrounding grounds of redundant vegetation.

The deaths were due in 33 cases to cerebro spinal diseases; in 31 to thoracic diseases, including 20 cases of phthisis; in 20 cases to abdominal diseases; and in 7 cases to general diseases, including two cases enteric fever.

Of the 13 admissions due to moral causes, two were attributed to religious excitement (revivalism). Of the total number admitted, 104 cases had inherited insanity.

Progress was made with the restoration of the buildings, two wards were erected during the year and the dining hall restored; there still remains some repairs to be effected on the male division; whilst owing to the increasing population another ward to accommodate 100 inmates is sanctioned for the female division, as well as some other structural alterations to meet the increasing demand for accommodation.

I have to record the loss of several valued employees of the institution: death claiming three of our attendants with 24, 20 and 17 years service respectively, whilst Attendants Gallimore, Simpson and Donaldson, with a record of 27, 23 and 19 years respectively, were superannuated.

The Governor granted leave of absence to the Right Reverend J. J. Collins, S.J., A. H. Jones, Esq., and James Ogilvie, Esq., M.D., F.R.C.S., in respect of their duties as members of the Board of Visitors. On leaving the island the Rev. Arthur James, B.A., resigned from the Board.

The matron was granted 4 months' leave of absence.

Our thanks are again due to many friends for gifts to the inmates, especially Mr. James Dunn, for liberal gifts of wine, biscuits, hams, butter, plum puddings, syrups, cigars and cigarettes.

Mrs. Bourne very kindly entertained the nurses at her residence, the Priory, and the following gentlemen presented the institution with illustrated papers and magazines: R. S. Haughton, Esq., W. P. Purdon, Esq., Archibald Munro, Esq., the Hon. Secretaries of the Jamaica Club, the St. Andrew Club and the Jamaica Institute.

The usual sports and entertainments were provided, and we have to thank many friends, including the officers of H.M.S. Scylla for their hearty co-operation in providing amusement for the patients.

The sum voted for the maintenance of the Asylum was £19,555 10s. 7d., the sum expended £19,131 15s. 7d. or a rate of 10½d. per head per day.

I am, Sir,

Your obedient servant,

D. J. WILLIAMS, Med. Supt.

TABLE I.—Shewing the actual admissions, re-admissions, discharges and deaths during the year ended 31st March, 1911.

				Males.	Females	Total.	Males.	Females	Total.
In Asylum 1st April, 1910	...	...	...	...	...	...	525	556	1,081
Cases admitted—									
First admissions	...	...	...	143	138	281			
Not first admissions	...	...	...	21	22	43			
Captured	...	...	...	...	...	...	3	...	3
Birth	...	...	...	...	...	...	..	I	I
Total Cases admitted during the year	...	...	...	...	...	...	164	160	324
Total cases under care during the year	...	...	...	...	...	...	692	717	1,409
Cases discharged—									
Recovered	...	...	...	71	72	143			
Relieved	...	...	...	I	...	I			
Not improved	...	...	...	I	...	I			
Escaped	..	...	...	3	...	3			
Died	...	...	...	49	42	91			
Infant removed	..	...	..	...	I	I			
Total discharged and died during the year	...	...	...	...	...	...	125	115	240
Remaining in Asylum 31st March, 1911	...	...	...	...	...	...	567	602	1,169
Average number resident during the year	...	...	...	...	...	...	546	591	1,137
Persons under care during the year (<i>i.e.</i> , separate persons in contradistinction to cases which may include the same individual more than once)	...	...	...	...	...	...	683	711	1,394
Persons admitted	do.	...	...	do.	...	...	160	159	319
Persons recovered	do.	...	...	do.	...	...	70	72	142

TABLE Ia.—Shewing the number of previous attacks among those admitted during the year 1910-1911, distinguishing those attacks that have been treated to recovery and discharged.

Number of previous attacks.	Having had previous attacks.					
	All attacks.			Attacks followed by discharge or recovery.		
	Males.	Females	Total.	Males.	Females	Total.
Have had 1 previous attack ...	35	19	54	4	4	8
Have had 2 previous attacks ...	12	6	18	3	1	4
Have had 3 previous attacks ...	4	5	9	—	3	3
Have had 4 previous attacks ...	—	1	1	—	1	1
Have had more than 5 attacks ...	2	1	3	2	—	2
	53	32	85	9	9	18

TABLE II.—Shewing the admissions, re-admissions, discharges and deaths for the past fourteen years ended 31st March, 1911.

	Males.	Females	Total.	Males.	Females	Total.
Remaining on 31st March, 1897 ...	...	...	...	345	377	722
Admitted during the last fourteen years ...	1,370	1,288	2,658			
Re-admissions ...	281	242	523			
Total number of admissions ...	...	...	...	1,651	1,530	3,181
Total number under care ...	...	...	...	1,996	1,907	3,903
Discharged cases						
Recovered ...	726	653	1,379			
Relieved ...	30	17	47			
Not improved ...	23	9	32			
Died ...	649	626	1,275			
Total discharged and died ...	...	...	...	1,428	1,305	2,733
Escaped and not captured during year ...	...	...	...	1	..	1
Remaining 31st March, 1911 ...	...	...	...	567	602	1,169
Average yearly number resident ...	...	...	...	474	478	952

TABLE III.—Shewing the Admissions, Discharges and Deaths, with the mean Annual Mortality, and the proportion of recoveries per cent. of the Admissions for each of the last fourteen years.

Year.	Admitted.			Discharged.										Remained 31st March in each year.			Average Number Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths. on average number Resident.				
				Recovered.				Relieved.		Not I mproved.																Died.	
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1897-98	109	95	204	34	34	68	...	...	...	2	...	2	25	44	69	393	394	787	377	382	759	31.19	36.84	34.01	6.63	11.16	8.89
1898-99	88	80	168	66	53	119	...	...	...	2	2	4	32	31	63	381	386	767	386	383	774	75.	66.25	70.62	8.29	7.98	8.13
1899-1900	96	93	189	34	32	66	1	...	1	2	2	4	38	30	68	402	417	819	390	399	789	35.41	34.41	34.90	9.74	7.52	8.36
1900-01	104	96	200	48	42	90	2	...	2	...	...	...	32	27	59	424	444	868	414	430	844	46.15	43.75	44.95	7.72	6.27	6.99
1901-02	99	83	182	55	48	103	3	1	4	2	...	2	40	38	78	423	440	863	423	439	862	55.55	57.83	56.69	9.45	8.65	9.05
1902-03	118	108	226	41	35	76	...	...	...	...	...	...	25	29	54	475	484	959	456	459	915	43.74	32.40	33.57	5.48	6.31	5.89
1903-04	105	101	206	34	33	67	...	...	...	3	...	3	38	57	95	505	495	1,000	492	480	972	32.38	32.67	32.52	7.72	11.87	9.79
1904-05	124	116	240	53	37	90	...	1	1	3	1	4	37	74	111	536	498	1,034	520	502	1,022	42.74	31.89	37.31	7.11	14.74	10.92
1905-06	34	96	230	52	53	105	11	4	15	1	...	1	44	42	86	562	495	1,057	545	503	1,048	38.80	55.20	47.	8.07	8.34	8.20
1906-07	109	125	234	83	68	151	8	5	13	...	...	...	76	45	121	504	502	1,006	543	505	1,048	76.14	54.40	55.27	13.99	8.91	11.45
1907-08	148	131	279	58	61	119	3	3	6	...	1	1	72	55	127	519	513	1,032	520	513	1,033	39.18	46.56	42.87	13.84	10.72	12.28
1908-09	114	123	237	51	34	85	4	2	6	1	2	3	81	39	120	496	559	1,055	515	535	1,050	44.73	27.64	36.18	15.72	7.28	11.50
1909-1910	139	123	262	46	51	97	1	1	2	2	1	3	60	73	133	525	556	1,081	510	571	1,081	33.09	41.46	37.27	11.76	12.78	12.27
1910-1911	164	160	324	71	72	143	1	...	1	1	...	1	49	42	91	567	602	1,169	546	591	1,137	43.29	45.	44.14	8.97	7.10	8.03
Totals	1,651	1,530	3,181	726	653	1,379	34	17	51	19	9	28	649	626	1,275	6,712	6,785	13,497	6,637	6,697	13,334	628.39	606.28	607.32	134.49	129.63	132.05
Average for 14 years.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	479.4	484.6	964.	474.	478.3	952.3	44.88	43.3	44.09	9.60	8.90	9.25

TABLE IV.—Shewing the history of the annual admissions for the past fourteen years, with the discharges and deaths, and the numbers of each year remaining on 31st March, 1911.

Year.	Admitted.			Of each year's admissions, discharged and died in the year.												Total discharged and died of each year's admissions to 31st March, 1911.												Remaining of each year's Admissions 31st March, 1911.			Year.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
	New Cases.		Re-admissions.		Recovered.			Relieved.			Not improved.			Died.			Recovered.			Relieved.			Not improved.			Died.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
					M.	F.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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1897-98	91	82	18	13	204</

Summary of total admissions.

Percentage of cases recovered
Do. relieved
Do. not improved
Do. died
Do. remaining

Males.			Females.			Both Sexes.		
39.91	39.47	39.69	1.21	1.30	1.25	1.21	1.30	1.25
1.21	1.30	1.25	1.21	1.30	1.25	1.21	1.30	1.25
30.16	27.18	28.67	30.16	27.18	28.67	30.16	27.18	28.67
27.51	31.60	29.56	27.51	31.60	29.56	27.51	31.60	29.56
100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00

TABLE V.—Shewing the causes of death during the year 1910–1911, with the ages at death.

	Under 15		15 & Under 20		20 & Under 25		25 & Under 30		30 & Under 35		35 & Under 40		40 & Under 45		45 & Under 50		50 & Under 55		55 & Under 60		60 & Under 65		65 & Under 70		70 & Under 75		75 & Under 80		80 & Under 85		Over 85	Total.		Grand Total.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		M.	F.		M.	F.
Cerebro-Spinal diseases—																																				
Chronic Brain disease	16
Cerebral softening	8
Maniacal exhaustion	.	2	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	3
Cerebral hemorrhage	3
Epilepsy	3
General paralysis
Hydatids of brain
Cerebral abscess
Meningitis
Fractured skull
Carcinoma of brain
Thoracic Disease—																																				
Phthisis	20
Pneumonia	4
Pleurisy	2
Abscess of lung	4
Pneumonia (septic)	1
Morbus cordis	4
Gangrene of Lung	1
Abdominal Diseases—																																				
Bright's disease	8
Dysentery	6
Colitis	2
Peritonitis	1
Pancreatitis	1
Suppurative nephritis	1
Abscess of liver	1
Cancer of Uterus	1
Strangulated hernia	1
General Diseases—																																				
Malarial Fever	1
Anæmia	1
Cellulitis	1
Suicidal hanging	1
Ankylostomiasis	1
Pellagra	2
Necrosis of jaw	2
Pyæmia	2
Marasmus	2
Enteric fever	2
Senile decay	2

TABLE VI.—Shewing the length of residence in those discharged recovered and in those who have died during the year 1910-1911.

Length of residence.			Recovered.			Died.		
			Males.	Females.	Total.	Males.	Females.	Total.
Under 1 month	...	...	...	I	I	3	2	5
From 1 to 3 months	...	...	6	I	7	6	6	12
From 3 to 6 "	...	...	23	15	38	7	2	9
From 6 to 9 "	...	...	19	26	45	5	8	13
From 9 to 12 "	...	...	5	11	16	3	3	6
From 1 to 2 years	...	...	9	13	22	4	6	10
From 2 to 3 "	...	...	6	4	10	4	2	6
From 3 to 5 "	...	...	2	...	2	6	4	10
From 5 to 7 "	...	...	I	I	2	4	I	5
From 7 to 10 "	...	...	...	...	...	2	4	6
From 10 to 12 "	...	...	...	...	...	...	I	I
From 12 to 15 "	...	...	...	...	...	I	...	I
From 15 to 20 "	...	...	...	...	...	2	I	3
From 20 to 25 "	...	...	...	...	...	2	I	3
From 25 to 30 "	...	...	...	...	...	...	...	...
From 30 to 35 "	...	...	...	...	...	...	...	...
From 35 to 40 "	...	...	...	...	...	...	...	...
Upwards of 40 "	...	...	...	...	...	...	I	I
			71	72	143	49	42	91

TABLE VII.—Shewing the duration of the disorder on admission in the admissions, discharges and deaths during the year ended 31st March, 1911.

CLASS.	Admissions.			Discharges.						Deaths.		
				Recovered.			Removed. Relieved or otherwise.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
<i>First Class.</i> —First attack, and within 3 months on admission ...	70	94	164	40	44	84	I	...	I	19	32	51
<i>Second Class.</i> —First attack, above 3 and within 12 months on admission ...	16	16	32	6	5	11	...	...	...	8	3	11
<i>Third Class.</i> —Not first attack, and within 12 months on admission ...	46	32	78	23	21	44	I	...	I	14	3	17
<i>Fourth Class.</i> —First attack or not, but of more than 12 months on admission ...	20	17	37	I	2	3	...	...	...	3	4	7
<i>Fifth Class.</i> —Congenital ...	I	I	2	...	...	...	...	...	...	...	...	...
Unknown ...	11	...	11	I	...	I	...	...	...	5	...	5
Total ...	164	160	324	71	72	143	2	...	2	49	42	91

TABLE VIII.—Shewing in quinquennial periods the ages of those admitted, recovered and died during the year 1910-11 and those remaining on 31st March, 1911.

Ages.	Admissions.			Recoveries.			Deaths.			Patients resident 31st March, 1911.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
From 5 to 10 yrs	...	...	...	...	...	...	...	...	...	...	...	...
" 10 to 15 "	...	2	2	1	1	2	...	...	...	...	5	5
" 15 to 20 "	10	11	21	4	7	11	1	1	2	11	9	20
" 20 to 25 "	26	16	42	12	7	19	8	4	12	44	35	79
" 25 to 30 "	31	35	67	14	9	23	10	7	17	76	69	145
" 30 to 35 "	35	35	70	11	20	31	7	6	13	83	78	161
" 35 to 40 "	17	16	33	7	8	15	4	7	11	76	88	164
" 40 to 45 "	12	16	28	7	9	16	3	4	7	85	77	162
" 45 to 50 "	14	11	25	4	5	9	5	2	7	62	65	127
" 50 to 55 "	9	9	18	5	3	8	3	6	9	46	63	109
" 55 to 60 "	2	3	5	2	1	3	2	2	4	40	48	88
" 60 to 65 "	5	2	7	3	1	4	3	1	4	22	29	51
" 65 to 70 "	1	2	3	1	...	1	1	...	1	8	20	28
" 70 to 75 "	1	1	2	...	1	1	1	...	1	10	7	17
" 75 to 80 "	1	...	1	...	...	...	1	1	2	3	4	7
" 80 to 85 "	...	...	...	...	...	...	...	...	...	1	2	3
" 85 to 90 "	...	...	...	...	...	...	...	1	1	...	2	2
" 90 to 95 "	...	...	...	...	...	...	...	...	...	...	1	1
Unknown	...	...	...	...	...	...	...	...	...	...	...	...
Totals	164	160	324	71	72	143	49	42	91	567	602	1,169
Mean Age	33.66	33.35	33.50	33.63	33.04	33.33	38.14	39.14	38.64	40.19	41.78	40.98

TABLE IX.—Shewing the condition as to Marriage in the Admissions, Recoveries and Deaths during the year.

Condition in reference to Marriage.			Admissions.			Recoveries.			Deaths.		
			M.	F.	T.	M.	F.	T.	M.	F.	T.
Single	...	...	109	103	212	45	46	91	36	27	63
Married	...	...	51	35	86	25	17	42	10	8	18
Widowed	...	...	3	12	15	1	7	8	1	2	3
Unknown	...	...	1	10	11	...	2	2	2	5	7
Total	...	...	164	160	324	71	72	143	49	42	91

TABLE X.—Shewing the probable causes of Insanity in the Patients admitted during the year ended 31st March, 1911.

Causes of Insanity.	Number of instances in which each cause was assigned.											
	Number of cases.											
	Admissions—Males 164, Females 160, Total 324											
	As pre-disposing cause.			As exciting cause.			As pre-disposing or exciting where these could not be distinguished			Total.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Moral—												
Domestic trouble (including loss of relatives and friends)	3	1	4	...	...	...	3	1	4
Adverse circumstances (including business anxieties and pecuniary difficulties)	2
Mental anxiety and worry (not included under above two heads) and overwork	2	...	2	...	...	...	2	...	2
Religious excitement	2	...	2	...	...	...	2	...	2
Love affairs (including seduction)	1	4	5	...	...	...	1	4	5
Fright and nervous shock
Grief
Earthquake shock
Physical—												
Intemperance in drink	11	...	11	...	...	...	11	...	11
Sexual Intemperance
Venereal Disease	3	...	3	...	...	...	3	...	3
Self-abuse (sexual)	1	...	1	...	...	...	1	...	1
Over-exertion	3	...	3	...	...	...	3	...	3
Ganga-smoking	6	...	6	...	...	...	6	...	6
Accident or injury	5	...	5	...	...	...	5	...	5
Puberty	...	10	2	12	...	...	...	...	...	10	2	12
Fevers	1	1	2	...	...	...	1	1	2
Privation and Starvation	2	...	2	...	...	...	2	...	2
Senility	...	4	5	9	...	...	...	...	...	4	5	9
Other bodily disease	4	...	4	...	...	...	4	...	4
Previous attacks	...	54	33	87	...	...	...	...	...	54	33	87
Hereditary influence	...	59	45	104	...	...	...	...	...	59	45	104
Congenital defect ascertained
Adolescence	33	33	...	...	...	...	...	...	33	33
Epilepsy	10	8	18	...	...	...	10	8	18
Puerperal Fever	8	8	...	...	...	...	8	8
Tubercular disease
Pregnancy	2	2	...	...	...	...	2	2
Not known	38	45	83	...	...	...	38	45	83
Other ascertained causes	1	1	...	...	...	...	1	1
Climacterium	6	6	...	...	...	...	...	...	6	6

*With reference to the distinction between "predisposing" and "exciteng" causes, it must be understood that no single cause is enumerated as both predisposing and exciting in the case of any individual patient.

†The figure in the total column represent the entire number of instances in which the several causes (either alone or in combination with others) were stated to have produced the mental disorder. The excess of the aggregate of such causes over the number of patients admitted is owing to the combination of causes.

TABLE XI.—Shewing the form of mental disorder in the Admissions, Recoveries and Deaths during the year and the form of mental disorder of the inmates on 31st March, 1910.

Form of Mental Disorder.	Admissions.			Recoveries.			Deaths.			Remaining in Asylum.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
Congenital or Infantile mental deficiency													
(a) with Epilepsy	...	1	2	3	...	...	...	1	...	1	10	6	16
(b) without Epilepsy	...	2	...	2	...	...	...	2	...	2	22	...	22
Epilepsy—Acquired	...	4	6	10	1	1	2	4	8	12	33	37	70
General Paralysis of the Insane	...	3	1	4	...	...	...	3	1	4	...	...	...
Mania—													
Acute	...	111	91	202	67	42	109	18	14	32	165	87	252
Chronic	...	22	8	30	...	...	...	12	9	21	270	231	501
Recurrent	...	7	32	39	3	22	25	...	2	2	8	93	101
a Potu	...	1	...	1	...	...	...	1	...	1	1	...	1
Puerperal	...	...	7	7	...	3	3	...	1	1	...	8	8
Senile	...	3	5	8	...	1	1	5	2	7	16	9	25
Melancholia—													
Acute	...	5	5	10	...	3	3	...	...	...	3	3	6
Chronic	...	...	1	1	...	...	...	...	1	1	...	...	...
Recurrent	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal	...	...	...	...	...	...	...	...	1	1	...	...	...
Senile	...	...	1	1	...	...	...	...	...	...	...	...	...
Dementia—													
Primary	...	...	...	...	...	...	...	...	...	...	...	5	5
Secondary	...	5	...	5	...	...	...	2	3	5	33	123	156
Senile	...	...	1	1	...	...	...	1	...	1	6	...	6
Organic (<i>i.e.</i> from tumours, coarse brain lesions, etc.)	...	...	...	...	...	...	...	...	...	...	...	...	...
	164	160	324	71	72	143	49	42	91	567	602	1169	

TABLE XII.—Shewing the previous occupations of patients admitted during the year 1910-1911

Males.			
Occupation.	No.	Occupation.	No.
Doctors	2	Goldsmith	1
Painter	1	Tobacconist	1
Musician	1	Planters	4
Cigarmaker	1	Shopkeepers	4
Carpenters	8	Schoolmasters	1
Baker	1	Shoemakers	8
Watchmen	2	Soldiers	2
Cultivators	5	Tailors	2
Agriculturist	1	Sawyer	1
Fisherman	1	Unknown	4
Labourers	86	Vagrants	3
Masons	3	None	3
Steward	1	Sailor	1
Clerks	5	Clergyman	1
Penkeeper	1	Gardener	1
Groom	1	Haytian Treasurer	1
Cartman	1	Cook	1
Medical Student	1	Watchmaker	1
Dispenser	1		
Speculator	1	Total	164

Females.

Occupation.	No.	Occupation.	No.
Butleress	1	Washerwomen	8
Domestic Servants	20	At school	1
Dressmakers	13	Unknown	11
Gentlewoman	1	Shopservers	2
Higglers	2	Breadseller	1
Labourers	88	Nil	6
Street Preacher	1		
Cooks	3	Total	160
Nurses	2		

TABLE XIII.—Shewing the Physical condition of patients admitted in 1910-1911.

	Males.	Females.	Total.
In good bodily health and condition	39	16	55
In fair bodily health and condition	58	115	173
In poor, feeble, very feeble, bad and exhausted condition	59	29	88
Impaired	8	...	8
Total	164	160	324

FINANCIAL STATEMENTS.

TABLE XIV.—Cost of maintenance for the year 1910-1911.

	£	s.	d.
Salaries	2,394	12	5
Wages	3,944	3	1
Religious Services	56	14	0
Provisions	9,364	13	9
Necessaries	369	15	9
Clothing and Bedding	1,261	8	8
Equipment	259	9	0
Furniture	68	15	1
Wine and Spirits	53	8	9
Surgery and Dispensary	278	13	2
Funeral Expenses	62	16	0
Removals	39	6	4
Tenants Repairs	143	6	11
Farm and Grounds	104	2	3
Miscellaneous	243	14	1
Telephones	24	3	0
Scavengery ... ..	...	...	...
Lighting	463	13	4
	£19,131	15	7

LESS RE-IMBURSEMENTS.

Contributing Patients, etc. ...	£676	7	10
Immigration Fund (Law 31 of 1910) ...	46	15	5½
Parochial Poor Rates ...	16,540	0	3½
Net cost of General Revenue ...	1,868	12	0½

TABLE No. XV.—Parochial Maintenance Account, Law 30 of 1873.

	No. of Patients 1909-10.			Amount for 1909-10.	No. of Patients 1910-11.			Amount for 1910-11.
	Males.	Fe- males.	Total.		Males.	Fe- males.	Total.	
				£ s. d.				£ s. d.
Kingston ...	85	121	206	2,829 8 7	89	125	214	2,840 8 8 $\frac{1}{2}$
St. Andrew ...	39	47	86	1,141 13 8 $\frac{1}{2}$	50	53	103	1,324 11 1 $\frac{1}{4}$
St. Thomas ...	25	33	58	687 2 1 $\frac{1}{2}$	18	36	54	713 10 7 $\frac{1}{4}$
Portland ...	26	23	49	645 5 5 $\frac{1}{2}$	25	25	50	671 5 7 $\frac{3}{4}$
St. Mary ...	46	29	75	1,059 7 11 $\frac{1}{2}$	50	33	83	1,044 5 2 $\frac{1}{4}$
St. Ann ...	33	36	69	1,018 16 3 $\frac{1}{2}$	33	47	80	1,029 19 11 $\frac{1}{4}$
Trelawny ...	9	23	32	466 17 9 $\frac{1}{2}$	13	30	43	567 16 3 $\frac{1}{4}$
St. James ...	24	30	54	766 2 4	34	32	66	830 13 6 $\frac{3}{4}$
Hanover ...	17	20	37	529 16 2 $\frac{3}{4}$	19	23	42	573 1 7
Westmoreland ...	38	47	85	1,056 1 0	50	48	98	1,203 15 0 $\frac{1}{2}$
St. Elizabeth ...	38	41	79	1,025 17 7 $\frac{1}{2}$	40	45	85	1,051 8 8 $\frac{1}{4}$
Manchester ...	38	35	73	844 13 1	43	32	75	807 9 2
Clarendon ...	54	56	110	1,536 6 0	62	49	111	1,395 16 1 $\frac{1}{4}$
St. Catherine ...	91	88	179	2,311 3 1 $\frac{1}{2}$	93	99	192	2,470 4 11 $\frac{3}{4}$
Port Royal ...	1	...	1	15 19 0 $\frac{1}{2}$	1	...	1	15 13 7 $\frac{3}{4}$
	564	629	1,193	15,934 10 4 $\frac{1}{4}$	620	677	1,297	16,540 0 3 $\frac{1}{4}$

TABLE XVI.—Statement respecting Minor Funds of the Jamaica Lunatic Asylum to 31st March, 1911.

1.—SERVANTS' FINE FUND.

Balance on 31st March, 1910 ...	...	...	£206 19 11 $\frac{3}{4}$
Receipts in 1910-1911 ...	...	...	33 2 3
			£240 2 2 $\frac{3}{4}$
Expenditure during 1910-1911 ...	...	...	7 19 6
Amount at credit 31st March, 1911 ...	...	...	£232 2 8 $\frac{3}{4}$

2.—PATIENTS' FUND.

Balance on 31st March, 1910 ...	...	...	£1,038 7 3 $\frac{1}{4}$
Receipts in 1910-1911 ...	...	...	120 5 0 $\frac{1}{4}$
			1,158 12 3 $\frac{1}{2}$
Expenditure during 1910-1911 ...	...	...	130 3 8 $\frac{1}{2}$
Amount at credit 31st March, 1911 ...	...	...	£1,028 8 7

3.—O'LAUGHLIN'S FUND.

Balance on 31st March, 1910 ...	...	...	£396 0 0
Receipts in 1910-1911 ...	...	...	62 18 1
			£458 18 1
Expenditure during 1910-1911 ...	...	...	26 17 7
Amount at credit 31st March, 1911 ...	...	...	432 0 6

TABLE No. XVII.—Shewing the total number of patients under treatment from 1879-80 to 1910-1911; the Total Cost; the Re-imbursement-in-Aid of Expenses incurred by the Government; the sources from which they are derived; and the Cost of Lunatic Asylum to General Revenue.

Years.	Total numbe of Patients under treat- ment.	Total Cost.	RE-IMBURSEMENTS-IN-AID.				Net Cost of the Lunatic Asylum to General Revenue.
			Contributing Patients, &c.	Immigration Department.	Parochial Poor Rate.	Total Re-imburse- ments-in-Aid.	
		£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1879-80	482	7,077 0 10½	168 7 8	None	4,180 7 1	4,348 14 9	2,728 6 1½
1880-81	490	7,251 9 2	191 7 2	"	4,195 15 5	4,387 2 7	2,864 6 7
1881-82	445	6,846 13 2½	134 16 1	"	4,256 1 3	4,390 17 4	2,455 15 10½
1882-83	512	7,061 16 9½	189 14 5	"	4,643 8 8	4,833 3 1	2,228 13 8½
1883-84	505	6,935 14 2½	208 6 2	"	5,203 10 11	5,411 17 1	1,523 17 1½
1884-85	513	6,871 12 6	252 13 2	"	4,879 16 0	5,132 9 2	1,739 3 4
1885-86	531	7,027 7 3	376 6 9	"	4,677 15 5	5,054 2 2	1,973 5 1
1886-87	530	7,067 10 4½	415 15 7	"	4,971 6 3	5,387 1 10	1,680 8 6½
1887-88	541	7,710 5 6	365 4 7	"	5,587 15 9	5,953 0 4	1,757 5 2
1888-89	584	8,781 14 0	391 0 6	"	6,677 13 2	7,068 13 8	1,713 0 4
1889-90	541	4,755 14 0	151 13 5	"	3,796 11 11	3,948 5 4	807 8 8
1890-91	648	10,093 10 7½	301 10 0	"	8,208 4 11	8,509 14 11	1,583 15 8½
1891-92	704	11,578 17 2½	471 6 10	"	9,276 3 2¾	9,747 10 0¾	1,831 7 1¾
1892-93	702	11,453 1 3¾	532 6 0	"	9,369 19 4	9,902 5 4	1,550 15 11¾
1893-94	729	11,280 18 1	492 16 4	"	9,197 13 9	9,690 10 1	1,590 8 0
1894-95	741	11,648 15 6½	384 2 8	"	9,457 16 2½	9,841 18 10½	1,806 16 8
1895-96	795	11,867 3 1¾	418 13 6	"	9,941 19 0	10,360 12 6	1,506 10 7¾
1896-97	851	12,901 18 4¾	458 15 2	"	10,932 11 0	11,391 6 2	1,510 12 2¾
1897-98	926	14,061 12 9	532 19 8	"	11,772 1 4	12,305 1 0	1,756 11 9
1898-99	953	13,651 4 1	359 10 8	"	11,767 0 9	12,126 11 5	1,524 12 8
1899-1900	956	13,559 10 1	454 9 1	"	11,514 19 3	11,969 8 4	1,590 1 9
1900-1901	1,019	14,445 3 2½	525 8 5	"	12,333 1 8½	12,858 10 1½	1,586 13 1
1901-1902	1,050	14,759 17 8	547 3 10½	"	12,468 15 9¼	13,015 19 7¾	1,743 18 0¼
1902-1903	1,089	15,029 0 6	517 18 1½	"	13,101 14 3½	13,619 12 5	1,409 8 1
1903-1904	1,165	16,017 7 10	406 6 2	"	13,926 12 3½	14,342 18 5½	1,674 9 4½
1904-1905	1,240	16,007 2 0	449 9 2	"	13,843 10 0¾	14,292 19 2¾	1,713 6 0¼
1905-1906	1,264	16,852 9 7½	631 9 11½	"	14,396 14 5	15,028 14 4½	1,823 15 3
1906-1907	1,308	16,298 17 10	654 4 3½	"	14,246 2 7	14,900 6 10½	1,398 10 11
1907-1908	1,285	17,078 8 3	474 1 3	"	15,304 11 4½	15,778 12 7½	1,299 15 7½
1908-1909	1,269	17,786 8 11	633 5 10½	"	15,828 13 8½	16,461 19 7	1,324 9 4
1909-1910	1,320	17,453 7 7¾	459 16 1	"	15,934 10 4¼	16,394 6 5¼	1,059 1 2½
1910-1911	1,409	19,131 15 7	676 7 10	46 15 5¼	16,540 0 3¼	17,263 3 6½	1,868 12 0½
..	..	387,287 17 0¼	13,387 9 3½	46 15 5¼	316,090 15 5¼	329,535 0 2	57,812 0 1

TABLE No. XVIII.—A Return shewing the General Financial and other Operations of the Lunatic Asylum from the Year 1873-74 to the Year 1910-1911.

Year.	Daily Average Number.	Salaries and Religious Services.	Wages.	Provisions.	Necessaries.	Clothing, Furniture and Bedding
		£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1873-74	289.86	1,441 2 9	791 1 5 $\frac{3}{4}$	2,798 17 3 $\frac{3}{4}$	136 11 10 $\frac{1}{4}$	346 15 6 $\frac{1}{2}$
1874-75	324.43	1,412 2 10	879 15 7 $\frac{1}{2}$	3,037 14 1 $\frac{1}{2}$	139 5 0	487 0 10
1875-76	324 21	1,553 13 10	923 4 10 $\frac{1}{2}$	2,910 11 7 $\frac{1}{4}$	116 13 8 $\frac{3}{4}$	387 12 3
1876-77	342.52	1,660 4 11	868 8 2	2,832 18 11	134 15 11 $\frac{1}{2}$	347 12 11 $\frac{1}{2}$
1877-78	361 57	1,705 3 10	851 7 0 $\frac{1}{2}$	2,959 18 10	161 10 6	379 8 6 $\frac{1}{2}$
1878-79	364.06	1,853 6 4	865 8 10 $\frac{1}{2}$	3,167 9 11 $\frac{1}{2}$	224 0 10	333 12 2
1879-80	381.25	1,782 18 2	888 11 2	3,161 17 4	176 4 2	328 10 9 $\frac{1}{2}$
1880-81	368.48	1,771 16 6	884 1 3	3,272 19 3 $\frac{1}{2}$	218 3 2	289 10 3
1881-82	358.67	1,784 8 0	861 12 11	2,963 9 9	231 5 4	303 14 5
1882-83	364 06	1,829 3 8	922 2 5	3,152 13 8 $\frac{1}{2}$	220 19 7	322 0 6 $\frac{1}{2}$
1883-84	396 05	1,708 12 10	932 15 5 $\frac{1}{2}$	3,203 7 0	174 4 7	372 11 9 $\frac{1}{2}$
1884-85	399.98	1,792 10 10	936 2 3 $\frac{1}{2}$	3,079 11 8	166 7 0	337 4 4
1885-86	382.09	1,843 11 0	923 0 0	3,150 1 10 $\frac{1}{2}$	176 4 4	345 9 6
1886-87	407.58	1,556 16 7	933 13 2	3,416 13 5	216 19 8	421 12 3
1887-88	398.00	1,533 14 7	994 18 7	3,741 6 1 $\frac{1}{2}$	270 19 10	408 6 3
1888-89	438.24	1,783 9 9	1,161 7 10	4,280 19 5	358 0 0	438 3 2
1889-90 (6 mos.)	465.17	943 10 10	579 11 11	2,351 14 0	190 8 7	209 9 6
1890-91	496.16	1,918 8 6	1,268 15 0	5,102 14 2	403 6 6	433 4 11 $\frac{1}{2}$
1891-92	543.93	1,934 9 8	1,462 14 6 $\frac{1}{2}$	6,035 16 4	424 12 8 $\frac{1}{2}$	685 7 9
1892-93	558.57	1,969 0 0	1,461 6 9 $\frac{1}{2}$	5,421 17 7 $\frac{1}{2}$	514 18 2	691 17 8 $\frac{1}{2}$
1893-94	571.98	2,239 1 4	1,509 19 3	5,299 17 4 $\frac{1}{2}$	494 0 1	599 5 11 $\frac{1}{2}$
1894-95	592 72	2,394 17 3	2,259 5 2	4,565 11 10 $\frac{1}{2}$	529 13 7	667 8 10 $\frac{1}{4}$
1895-96	636.78	2,357 1 0	2,328 16 7	4,772 11 10 $\frac{1}{4}$	499 1 6	625 2 5
1896-97	694.15	2,519 17 9	2,410 18 3	5,336 10 2	545 9 2 $\frac{3}{4}$	803 18 8 $\frac{1}{2}$
1897-98	759.70	2,554 1 11	2,838 16 10	5,470 9 11	615 17 4 $\frac{1}{4}$	993 2 4 $\frac{1}{2}$
1898-99	774.96	2,586 1 2	3,175 7 6	5,342 10 9 $\frac{3}{4}$	529 7 0 $\frac{3}{4}$	924 14 4 $\frac{1}{2}$
1899-1900	789.03	2,441 4 10	3,202 3 5	5,367 9 11	581 0 1 $\frac{1}{4}$	977 9 3 $\frac{1}{2}$
1900-1901	844 32	2,564 0 11	3,198 9 11	5,807 12 5 $\frac{1}{2}$	781 1 0 $\frac{1}{2}$	992 2 6 $\frac{1}{2}$
1901-1902	862.68	2,438 8 6	3,266 7 4	6,007 9 7 $\frac{1}{2}$	799 8 4 $\frac{1}{2}$	1,197 6 1 $\frac{1}{4}$
1902-1903	915.42	2,486 19 2	3,367 2 11	6,113 5 10 $\frac{1}{4}$	799 5 2	1,099 16 1 $\frac{1}{4}$
1903-1904	972.20	2,391 1 10	3,419 12 9	6,880 5 2 $\frac{3}{4}$	884 2 7	1,408 11 11
1904-1905	1022.26	2,142 4 10	3,470 1 11	7,618 9 3	882 7 4	1,069 3 9
1905-1906	1048.56	2,114 14 6	3,543 15 6	8,342 0 8 $\frac{1}{2}$	979 19 10 $\frac{1}{2}$	797 11 10
1906-1907	1048.74	2,230 17 7	3,672 11 10	7,5 5 11 0	994 15 4 $\frac{1}{2}$	1,023 19 0
1907-1908	1033.61	2,302 16 7	3,784 15 8	8,084 9 1	305 12 9	1,525 9 7
1908-1909	1050.02	2,376 6 3	3,825 10 3	8,874 4 2	42 3 4	1,212 8 5
1909-1910	1081.60	2,432 0 0	3,834 1 9	8,616 8 1 $\frac{1}{2}$	460 4 6	...
1910-1911	1137.15	2,451 6 5	3,944 3 1	9,364 13 9	369 15 9	...
Year.	Wine, Spirits, and Beer.	Surgery and Dispensary.	Funeral Expenses.	Tenants' Repairs.	Farm and Garden.	Miscellaneous & Telephone.
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1873-74	44 11 5	65 6 0 $\frac{1}{4}$	28 18 3	108 14 7	228 3 7 $\frac{1}{4}$	90 17 10
1874-75	90 0 3 $\frac{1}{2}$	85 19 1 $\frac{1}{2}$	32 18 6	136 16 7	265 0 6	99 5 7
1875-76	74 6 6	124 6 11	44 7 0	135 13 9	297 14 2 $\frac{1}{2}$	99 10 5 $\frac{1}{2}$
1876-77	59 12 6	65 10 6 $\frac{1}{2}$	36 19 4 $\frac{1}{2}$	129 13 11 $\frac{1}{2}$	251 18 2	68 3 4 $\frac{1}{2}$
1877-78	34 2 9	99 9 7 $\frac{1}{2}$	41 9 9 $\frac{1}{2}$	134 15 6 $\frac{1}{2}$	195 3 1 $\frac{1}{2}$	192 16 6
1878-79	30 5 9	49 4 7	38 10 1	104 4 8	151 6 4	175 18 10
1879-80	34 11 0	76 13 2	50 1 5	122 3 0 $\frac{1}{2}$	218 14 5 $\frac{1}{2}$	222 13 4
1880-81	57 10 0	65 13 2 $\frac{1}{2}$	110 19 5	122 18 0	211 15 5 $\frac{1}{2}$	215 12 9
1881-82	48 18 6	49 10 7 $\frac{1}{2}$	71 4 11	117 6 11	145 15 1	243 3 3
1882-83	30 7 0	32 5 1 $\frac{1}{2}$	123 12 6	116 1 8	87 1 9 $\frac{1}{2}$	199 18 5 $\frac{1}{2}$
1883-84	61 4 0	68 11 8	78 3 3	129 10 9 $\frac{1}{2}$	97 8 3 $\frac{1}{2}$	84 11 6 $\frac{1}{2}$
1884-85	46 18 0	25 18 4	84 10 8 $\frac{1}{2}$	112 3 7 $\frac{1}{2}$	122 7 10	98 8 5 $\frac{1}{2}$
1885-86	56 16 0	30 18 11	108 3 8	125 9 3	132 0 7	112 6 7 $\frac{1}{2}$
1886-87	56 0 0	68 10 4	52 5 10	120 12 1	122 3 10 $\frac{1}{2}$	71 12 2
1887-88	65 13 4	67 2 7 $\frac{1}{2}$	61 5 1 $\frac{1}{2}$	282 0 2 $\frac{1}{2}$	151 5 11	109 10 2
1888-89	68 14 0	104 15 7	78 5 9	151 5 8	134 8 4	206 19 9
1889-90 (6 mos.)	32 14 6	101 7 0	41 1 5	105 1 0	88 5 11	88 16 2
1890-91	40 12 0	168 9 10	66 16 0	176 3 3 $\frac{1}{2}$	160 3 0	190 11 7 $\frac{1}{2}$
1891-92	45 13 6	141 18 3	78 8 3	190 6 2	171 9 4	175 12 2 $\frac{1}{2}$
1892-93	41 12 6	207 7 7	71 2 8	233 0 6 $\frac{1}{2}$	177 14 11	187 6 4
1893-94	37 6 6	184 10 4	79 7 0	191 16 0 $\frac{1}{2}$	177 14 3	194 12 8 $\frac{1}{2}$
1894-95	37 2 8	195 3 4	68 5 11	239 19 2 $\frac{3}{4}$	194 10 8	234 16 1 $\frac{1}{2}$
1895-96	39 7 9	197 17 10	47 11 8	238 19 3	197 18 11	235 4 9 $\frac{1}{2}$
1896-97	33 7 6	194 1 4	50 10 2 $\frac{1}{2}$	259 7 7	219 4 9	242 16 10 $\frac{1}{2}$
1897-98	51 0 6	238 4 2 $\frac{1}{2}$	64 2 11	289 1 8	262 7 3 $\frac{1}{4}$	366 2 3 $\frac{1}{2}$
1898-99	31 10 2 $\frac{1}{2}$	253 15 2 $\frac{1}{2}$	68 2 4 $\frac{1}{2}$	164 17 3 $\frac{3}{4}$	153 12 11 $\frac{1}{2}$	215 13 5 $\frac{1}{4}$
1899-1900	35 0 3	218 16 1	72 12 6 $\frac{1}{2}$	144 19 2 $\frac{1}{2}$	137 17 9	251 17 1 $\frac{1}{2}$
1900-1901	39 1 6	133 0 2	45 0 9	163 15 7 $\frac{1}{2}$	149 17 7	265 3 6 $\frac{1}{2}$
1901-1902	43 0 6	210 15 0	61 17 4	147 17 7 $\frac{1}{4}$	145 14 8 $\frac{1}{4}$	254 2 4
1902-1903	44 13 0	220 11 10	46 2 5	171 10 1 $\frac{3}{4}$	151 0 4 $\frac{1}{2}$	262 12 1 $\frac{3}{4}$
1903-1904	60 16 0	210 18 3	79 18 4	187 6 10	153 2 4 $\frac{1}{2}$	266 15 0 $\frac{1}{4}$
1904-1905	42 6 6	180 14 6	73 2 2	138 5 6	88 1 2	212 15 3
1905-1906	24 18 3	271 2 6	73 5 7	180 2 5	81 17 3	217 14 1 $\frac{1}{2}$
1906-1907	22 8 6	318 1 4	64 19 0	162 14 0	33 9 0 $\frac{1}{2}$	198 13 5
1907-1908	36 19 6	288 18 11 $\frac{1}{2}$	72 19 6	134 14 0	40 0 6 $\frac{1}{2}$	302 2 11
1908-1909	23 1 3	264 14 6	72 8 0	173 3 5	27 4 4	184 1 6
1909-1910	55 19 3	255 10 11	70 14 0	80 17 0	96 11 9	213 18 3 $\frac{1}{2}$
1910-1911	53 8 9	278 13 2	62 16 0	143 6 11	104 2 3	266 17 1

TABLE NO. XVIII, *continued.*

Year.	Removal of Lunatics.	Scaven- gery.	Furniture Public Depart- ments.	Total Cost.	Amount of Reimburse- ments-in- Aid.	Net Cost.	Weekly Rate per Head.	Admitted during the Year.		
	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	Male.	Fe- male.	Total.
1873-74	23 4 0	...	...	6,104 4 7 $\frac{3}{4}$	700 6 0	5,403 18 7 $\frac{3}{4}$	0 7 1 $\frac{3}{4}$	59	44	103
1874-75	16 19 0	...	...	6,682 18 0	888 1 6	5,844 16 6	0 6 10 $\frac{3}{4}$	46	38	84
1875-76	4 0 0	...	...	6,671 15 1 $\frac{1}{2}$	752 1 6	5,919 13 7 $\frac{1}{2}$	0 6 11 $\frac{3}{4}$	58	43	101
1876-77	17 12 8	...	...	6,473 11 5 $\frac{1}{2}$	827 5 0	5,646 6 5 $\frac{1}{2}$	0 6 3 $\frac{3}{4}$	69	43	112
1877-78	19 0 3	...	...	6,774 6 4 $\frac{1}{2}$	764 18 10	6,009 7 6 $\frac{1}{2}$	0 6 4 $\frac{1}{2}$	54	49	103
1878-79	11 0 6	...	...	7,004 8 11	159 12 10	6,844 16 1	0 7 2 $\frac{1}{4}$	53	51	104
1879-80	14 2 10	...	...	7,007 0 10 $\frac{1}{2}$	168 7 8	6,908 13 2 $\frac{1}{2}$	0 6 11	56	59	115
1880-81	30 9 8	...	...	7,251 9 2	191 7 2	7,060 2 0	0 7 4	65	42	107
1881-82	26 9 6	...	...	6,846 13 2 $\frac{1}{2}$	134 16 1	6,711 17 1 $\frac{1}{2}$	0 7 2	42	56	98
1882-83	25 10 4	...	...	7,061 16 9 $\frac{1}{2}$	189 14 5	6,872 2 4 $\frac{1}{2}$	0 7 2 $\frac{3}{4}$	73	68	141
1883-84	24 13 0	...	...	6,935 14 2 $\frac{1}{2}$	208 6 2	6,727 8 0 $\frac{1}{2}$	0 6 5 $\frac{1}{4}$	80	59	139
1884-85	19 10 0	...	...	6,871 12 6	252 13 2	6,618 19 4	0 6 4	56	64	120
1885-86	28 18 1	...	...	7,027 7 3	376 6 9	6,651 0 6	0 6 8	69	70	139
1886-87	30 11 0	...	...	7,067 10 4 $\frac{1}{2}$	415 15 7	6,651 14 9 $\frac{1}{2}$	0 6 3 $\frac{1}{2}$	79	62	141
1887-88	24 2 9	...	...	7,700 5 6	365 4 7	7,345 0 11	0 7 0	78	71	149
1888-89	15 4 9	...	...	8,781 14 0	391 0 6	8,390 13 6	0 7 4	92	69	161
1889-90(6 mos.)	10 9 0	...	...	4,755 14 0	151 13 5	4,604 0 7	0 7 7	39	43	82
1890-91	22 1 0	...	...	10,093 10 7 $\frac{1}{2}$	301 0 0	9,792 0 7 $\frac{1}{2}$	0 7 7	93	79	172
1891-92	25 3 6	207 5 0	...	11,578 17 2 $\frac{1}{2}$	471 6 10	11,107 10 4 $\frac{1}{2}$	0 7 8 $\frac{3}{4}$	80	106	186
1892-93	19 3 6	195 12 8	261 0 4	11,453 1 3 $\frac{3}{4}$	532 6 0	10,920 15 3 $\frac{3}{4}$	0 7 7	78	80	158
1893-94	18 7 9	192 19 0	62 0 6	11,280 18 1	492 16 4	10,788 1 9	0 7 2	75	78	153
1894-95	19 6 6	193 9 4 $\frac{1}{2}$	49 5 0	11,648 15 6 $\frac{1}{2}$	384 2 8	11,264 12 10 $\frac{1}{2}$	0 7 3 $\frac{1}{2}$	84	85	169
1895-96	27 7 6	192 0 2	47 8 11	11,867 3 1 $\frac{3}{4}$	418 13 6	11,448 9 7 $\frac{3}{4}$	0 6 10 $\frac{1}{2}$	90	84	174
1896-97	27 12 0	208 4 0	50 0 0	12,901 18 4 $\frac{1}{2}$	458 15 2	12,443 3 2 $\frac{1}{2}$	0 6 10 $\frac{1}{2}$	81	106	187
1897-98	19 0 3	199 11 1	99 14 2	14,061 12 9	532 18 9	13,528 13 1	0 6 10	109	95	204
1898-99	39 10 9	126 0 11	...	13,651 4 1	359 10 8	13,291 13 5	0 6 7	88	80	168
1899-1900	24 13 6	104 5 3	...	13,559 10 1	454 9 1	1,305 1 0	0 6 4	96	93	189
1900-1901	26 4 3	116 12 7	163 0 4	14,445 3 2 $\frac{1}{2}$	525 8 5	13,919 14 9 $\frac{1}{2}$	0 6 4	104	96	200
1901-1902	29 5 9	115 12 6	42 12 0	14,759 17 8	547 3 10 $\frac{1}{2}$	14,212 13 9 $\frac{1}{2}$	0 6 4	99	83	182
1902-1903	22 6 9	111 10 5	94 12 11	15,029 0 6	517 18 1 $\frac{1}{2}$	14,511 2 4 $\frac{1}{2}$	0 6 1	118	108	226
1903-1904	17 5 9	22 0 5	35 10 6	16,017 7 10	406 6 2	15,611 1 8	0 6 2	105	101	206
1904-1905	19 18 0	17 17 1	50 18 0	16,006 5 3	449 9 2	15,557 12 10	0 5 10	124	116	240
1905-1906	30 11 3	3 18 0	190 17 10	16,852 9 7 $\frac{1}{2}$	631 19 11 $\frac{1}{2}$	16,220 9 8	0 5 11	134	96	230
1906-1907	35 18 3	...	4 19 6	16,298 17 10	654 4 3 $\frac{1}{2}$	15,644 13 0 $\frac{1}{2}$	0 5 10	109	125	234
1907-1908	30 12 9	2 16 3	...	17,078 8 3	474 1 3	16,604 7 0	0 6 3 $\frac{1}{2}$	148	131	279
1908-1909	22 11 0	1 11 8	...	17,786 8 11	633 5 10 $\frac{1}{2}$	17,153 3 0 $\frac{1}{2}$	0 6 5	114	123	237
1909-1910	22 2 3	0 12 6	70 2 1	17,453 7 7 $\frac{3}{4}$	459 16 1	16,993 11 6 $\frac{1}{2}$	0 6 1 $\frac{1}{2}$	139	123	262
1910-1911	39 6 4	...	68 15 1	19,131 15 7	723 3 3 $\frac{1}{4}$	13,408 12 3 $\frac{3}{4}$	0 6 0	164	160	324

Year.	Lighting.	Clothing and bedding.	Equipment.
	£ s. d.	£ s. d.	£ s. d.
1907-1908	166 9 2	—	—
1908-1909	303 0 10	—	—
1909-1910	311 11 8	791 1 6 $\frac{3}{4}$	141 12 0
1910-1911	463 13 4	1,261 8 8	259 9 0

LEPERS' HOME.

Report for the year ended 31st March, 1911.

Jamaica Leper Asylum, 22nd May, 1911.

SIR,

I have the honour to submit the Annual Report on this Institution for the financial year ended 31st March, 1911.

The Medical Officer was seconded for special duty with the Malaria Commission for five months during which period the Asylum was in charge of Dr. A. C. Lopez.

The Matron was granted sick leave in August and the Matron from the Spanish Town Hospital acted in a most efficient manner for six months.

As it was necessary to extend the leave to Miss Newell other arrangements were made, and Miss Nicholson, a nurse from the Kingston Hospital was placed in charge.

Under the guidance of the Superintendent she performs her duties very commendably

The buildings and grounds are in good order.

The Farm is maintained in good cultivation and continues to yield all the sweet potatoes and vegetables required for the diets. The very few cases of malaria fever treated during the year (78) demonstrates the fact that it is also maintained in good sanitary condition.

Papers and Magazines have been received from Mrs. Wigan, Mrs. Neish, Mrs. Russel, Miss McGrath, Sir Henry and Lady Blake and Mr. Bennett.

During the year the Institution was visited by His Grace the Archbishop of the West Indies and the Bishop of British Honduras.

The special treatment of Leprosy advocated by Deyke Pasha has been continued, but is at present in abeyance until the special syringe ordered has been received from England.

Statistics—Admissions 24. Deaths 16.

Mortality rate 12.6 Average longevity of Leper life.

Tubercular M. 12 10-12 years.

F. 12 9-12 years. Anaesthetic M. 13 8-12 years.

F. 21 7-12 years.

The usual Tables are appended.

I have, etc.,

Sgd.

W. D. NEISH,
Medical Attendant.

The S.M.O., Kingston.

TABLE NO. I—General Statistics for 1910-1911.

(1 April 1910, to 31st March, 1911.)

		Male.	Females.	Total.	Remarks
Remaining in Asylum 31/3/1910	..	54	49	103	Law 15 of 1896 Sec. 9.
Admitted during 1910-1911	..	16	8	24*	
Discharged	..	2	1	3	
Absconded	..	2	2	4	
Died	..	9	7	16	
Remaining in Asylum 31/3/1911	..	57	47	104	

* Of those admitted 4 are re-admissions (males 3. Females 1) = 4.

Death rate per centum 12.6.

—except 1 transferred from Lunatic Asylum— not a leper. (Female)

TABLE No. II.—Comparative statistics from 1st October, 1878, to 31st March, 1911.

Year.	Admissions.		Discharges.		Deaths.		Remaining at end of Year.		Death rate per 100.
	Lepers.	Non-Lepers.	Lepers.	Non-Lepers.	Lepers.	Non-Lepers.	Lepers.	Non-Lepers.	
1878-79	26	39	2	40	10	3	40	31	10.31
1879-80	26	43	8	31	7	..	51	33	5.
1880-81	39	101	16	72	11	4	63	58	6.69
1881-82	38	115	23	107	13	5	65	61	6.50
1882-83	40	85	22	96	8	3	75	47	4.38
1883-84	30	71	26	63	9	3	70	52	5.38
1884-85	33	87	18	80	14	..	71	59	5.78
1885-86	39	131	17	114	16	2	77	74	6.
1886-87	25	141	17	130	16	6	69	79	6.94
1887-88	32	8	..	19	23	8	78	60	16.48
1888-89	31	93	4	98	11	6	94	49	6.48
Oct., '89 to March '90	9	22	6	35	12	2	82	37	8.04
1890-91	34	67	15	88	15	2	86	14	7.74
1891-92	38	2	8	9	15	2	106	5	12.16
1892-93	26	1	16	4	1	..	100	2	8.27
1893-94	23	2	24	3	20	..	79	1	15.74
1894-95	26	1	12	..	18	..	75	2	16.82
1895-96	37	2	8	4	10	..	94	..	8.62
1896-97	40	2	11	2	16	1	106	..	12.5
1897-98	38	1	3	2	13	..	127	..	8.96
1898-99	20	2	8	3	20	..	118	..	13.6
1899-1900	27	3	3	2	20	..	122	1	13.5
1900-01	19	3	6	2	15	..	120	2	10.3
1901-02	9	1	4	..	14	2	110	2	11.4
1902-03	19	..	2	2	17	..	108	2	13.
1903-04	33	3	5	3	20	..	117	1	13.7
1904-5	25	..	5	..	23	..	114	1	16.1
1905-06	19	..	3	..	14	..	115	1	10.4
1906-07	14	..	1	..	15	..	113	1	11.62
1907-08	12	..	5	1	14	..	105	..	11.1
1908-09	24	..	..	1	15	..	112	1	11.6
1909-10	12	1	7	..	10	6	102	2	12.7
1910-11	24	..	6	1	15	1	103	1	12.6

TABLE III.—Return of Admissions for 1910-1911.

No.	Names.	Age. Years.		Form of Leprosy.	Years afflicted.	If Re-admitted.	Country.	Late Residence.	Date of Admission.
		M.	F.						
1	Theoph. Haylett	39	..	T.	11	No	Jamaica	St. Catherine	6.4.10
2	Amos Lawrence	40	..	a.	3	"	"	St. Ann	14.4.10
3	Martha Barrett	..	24	T.	3	"	"	St. Ann	3.5.10
4	Clem Campbell	..	13	T.	5 mth	"	"	Clarendon	19.5.10
5	Adriana Foster	..	23	T.	1½ yrs	yes	"	Kingston	20.5.10
6	Jethro Brown	21	..	T.	2	no	"	St. Ann	21.5.10
7	John McIntosh	61	..	(?) a.	10	no	"	Westmoreland	19.6.10
8	Win. Angus	41	..	a.	28	yes	"	St. Catherine	25.8.10
9	Aug. McDonald	49	..	a.	3½	no	"	do.	15.9.10
10	Florence Lindo	..	12	T.	6	no	"	Kingston	30.9.10
11	Carl Lindo	14	..	T.	7	no	"	do.	30.9.10
12	Wilhel Hayle	..	50	a.	15	no	"	Westmoreland	2.11.10
13	Jane Murray	..	40	T.	4	no	"	St. Andrew	3.11.10
14	Samuel Bell	50	..	a.	24	no	"	St. Catherine	1.12.10
15	Alfred Graham	40	..	T.	5	no	"	do.	6.12.10
16	Chees Douce	20	..	T.	5	no	"	do.	8.12.10
17	W. Douglas	35	..	T.	6	no	"	St. Mary	20.12.10
18	Zach. Quire	48	..	a.	14	no	"	St. Catherine	12.1.11
19	Jonah Nerner	52	..	T.	1	yes	"	Clarendon	17.3.11
20	Ellen Seaton	..	51	(?) T.	21	no	"	do.	16.3.11
21	Chas. Turner	39	..	a.	7	no	"	Manchester	26.3.11
22	Theop. Gayle	39	..	a.	9	no	"	do.	26.3.11
23	Cath. Shaw	..	30	a.	16	no	"	St. James	18.3.11
24	Kampta	25	..	T.	1	yes	India	St. Thomas	22.3.11

TABLE IV.—Birthplaces of admitted, 1910-1911.

Birthplace.	Male.	Female.	Total.
St. Catherine	7	..	7
St. Ann	2	1	3
Clarendon	1	2	3
Kingston	1	2	3
Westmoreland	1	1	2
St. Andrew	..	1	1
St. Mary	1	..	1
Manchester	2	..	2
St. James	..	1	1
St. Thomas	1	..	1
	16	8	24

TABLE V.—Return of those discharged in 1910-1911

No.	Names.	Country.	Age Years.		Date of Admis- sion.	Date of Discharge.	Total Years Afflicted.	Form of Leprosy.	Reason for Discharge.
			M.	F.					
1	D. Ashman	Jamaica	28	..	30.12.1890	27.5.1910	21	a.	Law 15 of 1896 Sec. 9
2	Evelina Shaw	"		23	24.4.1899	28.6.1910	19	a.	Absconded
3	Chas. Douce	"	20	..	8.12.1910	8.1.1911	6	a.	"
4	Alfred Graham	"	40	..	6.12.1910	8.1.1911	5	"	"
5	P. Jamieson	"	34	..	19.11.1898	5.1.1911	16	"	Law 15 of 1896 Sec. 9
6	Lilian Taylor	"	..	23	30.9.1903	11.8.1910	10	"	Absconded
7	Martha Miller	"	..	?	21.3.1910	28.4.1910	Not a	Leper	Transferred to Lunatic Asylum

TABLE VI.—Birthplace of those discharged and absconded, 1910-1911.

Birthplace.	Males.	Females.	Total.
Manchester	1	1	2
St. Catherine	2	..	2
Clarendon	..	2	2
St. Thomas	1	..	1
	4	3	7

TABLE VII.—Return of Deaths for 1910-1911.

No.	Names.	Country.	Colour.	Age.		Date of Admission.	Date of Death.	Form of Leprosy.	Total years Afflicted.	Cause of Death.
				M.	F.					
1	Louis Ellis	Jamaica	White	24	..	17.1908	15.5.10	A	years 4	Fracture of Skull
2	Catherine Reid	"	Black	29	30	17.11.1890	16.4.10	T.	21	Chr. Bronchitis
3	Cynthia Craig	"	Brown	..	29	17.2.1897	13.6.10	T.	15	Chr. Diarrhoea
4	Martha Barrett	"	Black	..	24	3.5.1910	28.6.10	T.	3	"
5	Viola Wade	"	Brown	..	20	9.6.1899	10.7.1910	T.	12	Chr. Nephritis
6	James Williams	"	Black	63	..	2.11.1888	5.8.1910	A.	25 $\frac{3}{4}$	Chr. Bronchitis
7	John Pottinger	"	"	33	..	15.2.1891	12.8.1910	T.	28	Chr. Nephritis
8	Thos. Ebanks	"	Brown	28	..	19.3.1908	5.10.1910	A.	4 $\frac{1}{2}$	Pneumonia
9	Caroline Ewell	"	"	..	41	1.7.1908	7.10.1910	A.	28 $\frac{1}{4}$	Chr. Diarrhoea
10	Nath. Wallace	"	Black	36	..	27.2.1910	24.11.1910	T.	4 $\frac{3}{4}$	" "
11	Eliza Morgan	"	"	..	43	4.11.1897	3.12.1910	A.	15	Pul. Tuberculosis
12	Aug. McDonald	"	Brown	49	..	15.9.1910	19.1.1911	A.	3 $\frac{1}{3}$	Cardiac Failure
13	Nath. Thompson	"	Black	14	..	24.4.1908	2.3.1911	T.	5	Chr. Diarrhoea
14	William Angus	"	"	41	..	25.8.1910	21.1.1911	A.	31	Chr. Nephritis
15	Joseph Fuller	"	"	38	..	17.7.1903	11.3.1911	T.	13 $\frac{1}{2}$	" "
16	Mary Ann Thomas*	"	"	..	48	10.9.08	17.3.1911.	Is not a leper		Chr. Diarrhoea.

Average longevity of Leprosy in those who died:—

T.—Females—12 years, 9 moths, 15 days.

A. 21 years, 7 months,

T—Males 12 years, 10 months,.

A. 13 years, 8 months, 18 days.

TABLE VIII.—Birthplace of those deceased, 1910-1911.

Birthplace.	M.	F.	Total.
St. Ann	2	2	4
Manchester	1	2	3
St. Catherine	3	1	4
Clarendon	2	..	2
Kingston	1	1	2
St. Elizabeth .. .. .	..	1	1
	9	7	16

*Lunatic transferred from Lunatic Asylum.

TABLE IX.—Chief Inter-current diseases treated during 1910-1911.

FORM OF LEPROSY.								
Diseases.	Tubercular.		Anæsthetic.		Total.		Grand Total.	
	M.	F.	M.	F.	M.	F.		
General Diseases—								
Influenza	15	27	9	8	24	35	59	
Dysentery	5	7	8	6	13	13	26	
Mal. Feb.	25	16	13	24	38	40	78	
Lupus .. ..	..	..	..	..	..	..	1
Keloid .. ..	..	..	..	..	..	..	1
Diseases of the Nervous System—								
Neuralgia	2	8	5	4	7	12	19	
Hysteria	7	9	3	12	12	21	33	
Idiocy .. ..	..	..	2	..	2	..	2
Dementia .. ..	..	..	..	2	..	2	2
Mania .. ..	..	..	..	..	..	..	1
Diseases of the Eye—								
Conjunctivitis	15	7	6	15	21	22	43	
Iritis	6	7	9	6	15	13	28	
Disease of the Nose—								
Ozæma	16	8	8	6	24	14	38	
Diseases of Digestive System—								
Dyspepsia	80	50	60	34	140	84	224	
Diarrhœa	76	49	55	43	141	92	233	

